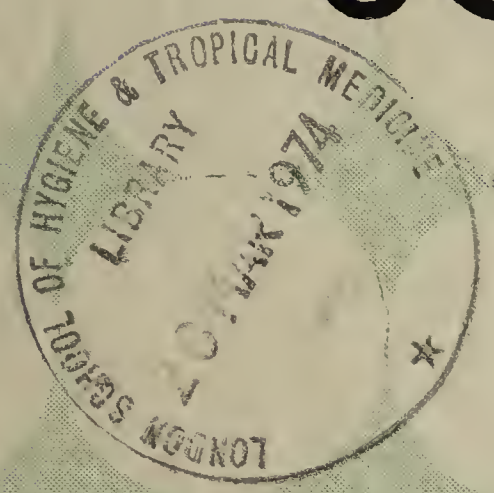


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PUBLIC HEALTH and SCHOOL HEALTH

in Southend on Sea

1972



The Annual Report of the Medical Officer of Health
for the County Borough of Southend on Sea

ANNUAL REPORT 1972

COUNTY BOROUGH OF SOUTHEND-ON-SEA HEALTH COMMITTEE

1972 - 1973

Ex-Officio

His Worship the Mayor - Alderman E. J. Pollitt
Leader of the Council - Alderman N. Harris, B.Sc.

Chairman

Alderman Mrs. V. E. Smith, J.P.

Vice Chairman

Alderman Mrs. M. M. C. Bullock-Jarman

Members

Alderman	R. E. J. Thomas
Councillor	W. F. Bowyer
"	Mrs. S. V. D'Ath
"	D. Garston
"	V. H. Gee
"	Mrs. N. I. Goodman
"	W. R. Lewis
"	E. W. J. Lockhart
"	G. A. Hurst
"	Mrs. M. D. J. Myers

Co-opted

J. C. Field, F.H.A.	Southend-on-Sea Group Hosp. Management Committee
Mrs. C. J. Raynham	Southend-on-Sea Local Executive Council
Dr. F. Emery	Southend-on-Sea Local Medical Committee



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Civic Centre,
Southend-on-Sea.

ANNUAL REPORT

I have the honour to present my report for the year 1972, a year largely of consolidation on the good work of the past.

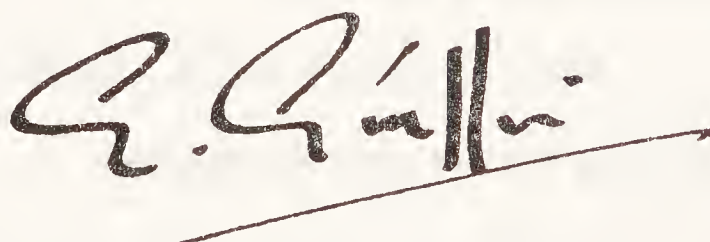
The excellent working relationships which have been the pattern over the years have continued; they helped to cement the working arrangements of the new Social Services and Health Departments, so that each Department and its Officers were able to work in a spirit of mutual co-operation for the benefit of the members of the population who require the expertise of either group.

The importance of the Environmental Health Service is underlined by the expanded commentary incorporated in the body of the report.

It is interesting to note the slight drop of attendances at the Authority's Infant Welfare Clinics which is compensated for by increased attendances at General Practitioners' Well Baby Clinics in their own practice premises following the attachment of Health Visitors to the group practices. This is probably a healthy indication of the future pattern of total Primary Health Care by the General Practice based "team".

The Nursing administration was altered during the year in accordance with the guidance provided by the "Mayston Report". A post of Director of Nursing Services was created, supported by two posts of Area Nursing Officers and four "First Line" Managers. This will enable the Nursing organisation to more readily meet the challenge which will be inevitable when the Health Services are reorganised since the "Mayston" structure will parallel the Hospital Services "Salmon" Nursing Structure.

May I take this opportunity of thanking all those who have contributed to this report and those who have assisted the Authority in their work, particularly the Hospital Management Committees, the Executive Council, St. John Ambulance Brigade and all the voluntary organisations, without whose help the Department's work would be so less effective. I am indebted to my colleagues, the Chief Officers of the Corporation and their staff for the assistance they have so willingly given throughout the year.

A handwritten signature in dark ink, appearing to read 'R. G. Halli', with a long horizontal line extending from the end of the signature.

Medical Officer of Health

STAFF OF THE PUBLIC HEALTH DEPARTMENT (AT 31.12.1972)

Medical Officer of Health:

G.V. Griffin, M.B., B.S., D.P.H., M.F.C.M.

Deputy Medical Officer of Health:

M.R. Mellor, M.B., Ch.B., L.R.C.P., D.P.H., M.F.C.M.

Senior Medical Officer of Health:

I.B. Barrie, M.B., Ch.B., D.R.C.O.G., D.P.H.

Senior Medical Officers in Department:

M.S. Adams, M.B., B.S., M.R.C.S., M.R.C.P.
Vacancy

Medical Officers in Department:

J. Greenhalgh, M.B., B.S., M.R.C.S., L.R.C.P., D.A.
E.G. O'Sullivan, L.R.C.P.S.I., L.M.

Part Time Medical Staff: 5

Principal Dental Officer:

J. Stratford, L.D.S.

Chief Public Health Inspector

E.A. Ellis, M.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector:

J. K. Blakely, M.A.P.H.I., Cert.R.S.H.

Public Health Inspectors: 9

Student Public Health Inspectors: 2

Director of Nursing Services :

Miss D. Heaton, S.R.N., S.C.M., H.V.Cert. Q.N.

Area Nursing Officer (Health Visiting) :

Mrs. M. D. Gower, S.R.N., H.V.

Area Nursing Officer (Home Nursing and Midwifery).

Miss F. L. Blackbourne, S.R.N., S.C.M., H.V. Cert.

Nursing Officers : 4

Health Visitors : 15 whole-time. 6 part-time.

Student Health Visitors :	5
Tuberculosis Visitor :	1
Home Nurses :	32 whole-time. 3 part-time.
Chiropody Staff :	1 whole-time.

Administrative Staff :

Health Services Administrator	R. W. G. Whitmore, A.C.I.S.
Chief Administrative Assistant	S. F. Jupp
Senior Administrative Assistant	Miss A. M. Roberts
Administrative Assistants	Mrs. K. E. Deck D. Jenkins Mrs. G. Knight R. A. Snazell

Administrative & Clerical Staff: 37

METEOROLOGICAL REPORT 1972

Snow fell at the beginnning and end of January, rainfall was above average and the last week was very cold with strong North Easterly winds.

February was warmer although dull and wet. Apart from the commencement being wet and cold, the month of March was comparatively warm with some fine sunny days. However the cold strong winds persisted through the latter part into April. Although the rainfall for April was below average there were numerous days with showers of light rain or drizzle.

May, with strong winds during the last week was reasonably sunny.

June was much drier than average but disappointing due to the blustery cold winds.

July was more promising but strong cold winds continued. It was the driest August since 1947 and whilst only average temperatures were recorded there were some fine sunny days.

September had below average sunshine but was a mild month.

October was notable for the low rainfall, not dissimilar to August. In fact the October rainfall was the lowest recorded since records have been maintained from 1907, with the exception of the war years when readings were not allowed to be taken due to the Government restriction.

November started with some foggy misty days, cold and dull and some ground frosts. December was similar, but in the main quite mild, with little sunshine.

Over all the year can be said to be much drier than the 20 year average but cold winds kept temperatures down during most months.

<u>Total Sunshine for the Year</u>	<u>Sunniest Month</u>	<u>Days with Sunshine</u>	<u>Total Rainfall</u>	<u>Mean Temp</u>	<u>Prevailing Wind</u>
1513.1 hours	August	278	388.1 mm	10.1 c	S.W.

I thank Mr. Fripp, the Director of Amenities for supplying the above report and allowing it to be reproduced here.

THE WORK OF THE DEPARTMENT

**PUBLIC HEALTH ACTS 1936—68
NATIONAL HEALTH SERVICE ACTS 1946—52
NATIONAL HEALTH SERVICE ACT 1946**

Section 21 — Health Centres

The year under review was one of steady progress and consolidation in moving towards the commencement of the construction of the two Health Centres, one, the Central Health Centre at Milton Street, and secondly the Health Centre at Kent Elms.

**Central Health
Centre,
Milton Street**

In the early part of the year discussion had been completed with the department on the draft plans of the building and these were approved, together with the revised schedule of accommodation in February. From then on a series of meetings was held relating to the internal design of the Health Centre floor and a great deal of work was put in with regard to the compilation of schedules of furniture and equipment required. Meetings were arranged between the staff of my department, the Borough Architects Department, General Practitioners who are entering the Health Centre, the General Dental Practitioners who are entering the Health Centre, the Chief Dental Officer, the Family Planning Association, Child Guidance Service, the Nursing Staff of my department, all of whom will have an interest in this building, to agree on the general layout and to finalise some items of internal design.

By October the bulk of the preparatory work was completed and Tenders were invited for the construction of the complex. By the end of the year, however, the Ministry's views on the estimate of the cost of the project had not been received and this was in fact not received until the 5th February 1973.

**Kent Elms
Health Centre**

Much the same procedure was adopted in relation to the Kent Elms Health Centre as has already been outlined for the Central Health Centre. This is a completely different construction problem in that it involves the building of a new floor over the existing clinic premises and providing access from the ground floor to the new first floor.

This being a much smaller development than the Central Health Centre, work was able to proceed rather more quickly and the Ministry's cost limit and approval in principle was received in March 1972. It was subsequently found, however, that the ever increasing cost of labour and materials made this figure inappropriate and a fresh round of talks with the department on the total cost of the project had to be entered into. This perforce was a rather lengthy exercise and resulted in the setting back of the project by some months, in that work did not start on site until August 1973.

No further progress was made during the year on the proposed Health Centre at Leigh.



SECTION 22 – CARE OF MOTHERS AND YOUNG CHILDREN (See Tables 7 - 13)

Clinics

Clinics continue to be held at the following Centres:-

Municipal Health Centre Porters Grange Avenue	-	Mondays, Tuesdays, Thursdays and Fridays
Leigh Clinic, Burnham Road	-	Mondays and 2nd and 4th Thursdays
Westcliff Clinic, 415, Westborough Road	-	Tuesdays and Fridays
Kent Elms Clinic, Rayleigh Road.	-	Wednesdays and Fridays Health Visitors Clinic. Medical Officer attends 1st, 3rd and 5th Fridays in each month
Blenheim Clinic St. James's Church Hall	-	Alternate Wednesdays - Health Visitors Clinic
Manners Way Clinic, St. Stephen's Church Hall	-	Until 12th September 1972,
Earls Hall Clinic, Earls Hall Baptist Church	-	1st 3rd and 5th Tuesday in each month until 19th September 1972, thereafter weekly. Health Visitors Clinic Medical Officer attends 3rd Tuesday in each month
North Avenue Clinic, Ferndale Road Baptist Church	-	Thursdays - Health Visitors Clinic
Thorpedene Clinic, Maplin Way	-	Wednesdays and Fridays Health Visitors Clinic Medical Officer attends 2nd and 4th Fridays in each month
Shoebury Health Centre, Campfield Road	-	Tuesdays - Health Visitors Clinic Medical Officer attends 1st Tuesday in each month

The continuing decline in the number of live births - 1979 this year, compared with 2019 in 1971 — accounted partly for the reduction in the number of infants attending the Child Welfare Clinics. The 1508 infants who attended represented 76.2% of those born in 1972 (compared with almost 81% in the previous year) while their 12,315 attendances showed a corresponding reduction of 698. As more health visitors became attached to general practitioners' surgeries, and are involved in the doctors' infant clinics, mothers are increasingly attracted there rather than to the Council's clinics.

Of the children born in 1971, 1270 made 8609 attendances, a reduction of 66 and 975 respectively when contrasted with the comparable group of last year. The overall increased incidence of attendance reported upon in 1971 was not maintained.

The number of children between the ages of two and five attending dropped from 743 to 588 but, surprisingly, they made 380 more attendances than in the preceeding year.

Shoeburyness Health Centre continued to show increased attendance of all age groups, as did Thorpedene Clinic. The number of toddlers who attended for routine medical inspections showed a welcome increase from 823 to 860.

Welfare and Other Foods

The distribution of National Dried Milk and Vitamins at Clinic and by certain retailers was continued. From 1st January 1972 we lost the services of the W.R.V.S. who for many years had given valuable help with the sale of Welfare Foods.

Sales of National Dried Milk showed a slight reduction, 11,064 packets against 11,993 in 1971. Proprietary foods continued to show a slight reduction in popularity, 1,527 fewer packets being sold in 1972 than in the preceding year. Although this can be attributed in part to the reduction in the birth rate, it is doubtless also due to the selling of these commodities in supermarkets and other establishments at prices comparable with or only slightly above those of the Clinics.

There was an increase of 2021 bottles of children's vitamin drops, 4887 being sold. In addition, 7564 bottles of orange juice (which ceased to be classified as a welfare food from 31st December 1971) were sold to clear the stock. The combined sale of these two products — 12,451 bottles — is a disappointing substitute for the 43,315 bottles of orange juice and children's vitamin drops dispensed in 1971. The cartons of vitamins A C and D which replaced the combined issue of vitamins A and D and orange juice also declined in popularity, 376 fewer being sold this year.

Ante-natal Clinics

Clinics continue to be held at the following Centres:-

Municipal Health Centre	-	Tuesdays, Thursdays and Fridays 9.15 a.m.
Leigh Clinic	-	1st, 3rd and 5th Thursdays - 2.00 p.m.
Kent Elms Clinic	-	Tuesdays - 2.00 p.m.
Westcliff Clinic	-	Wednesdays 9.00 a.m. and 2.00 p.m.
Thorpedene Clinic	-	Mondays - 2.00 p.m.

The number of individual expectant mothers attending fell from 2304 to 2154, a reduction of 150 only partly accounted for by the reduction of 44 in the total of live and still births. The attendances made by this group fell similarly from 8599 to 7376, reflecting the increasing part played by general practitioners in ante-natal care. Twenty years ago, an expectant mother made an average of 5.2 visits to the clinic, in 1962 this had fallen to 4.2 and last year it fell still further to 3.4. This is not to say of course that the average expectant mother's care was limited to this number of visits. Many make as many as 12 visits to the ante-natal clinic, but an increasing number see the Consultant only once or twice.

Blood Examinations

Routine examination is undertaken for A.B.O. and Rh. grouping, Rh. antibodies and haemoglobin. The V.D.R.L. test (approximating to the Wassermann Reaction Test) is also made. Of 1349 tests made, none was serum positive.

Post-Natal Clinics	Municipal Health Centre)	Combined with Ante-Natal sessions
	Leigh Clinic)	
	Kent Elms Clinic)	
	Westcliff Clinic)	
	Thorpedene Clinic)	

From 1st January 1972, the post-natal clinic session held formerly on 2nd and 4th Thursdays at the Municipal Health Centre was cancelled and the practice of examining post-natal mothers at ante-natal clinic sessions — observed at the peripheral clinics — was extended to this clinic. The numbers of those attending at all clinics continued to decline, 651 mothers making 749 attendances compared with 774 mothers and 900 attendances in 1971. This is to be expected as the general practitioners become increasingly involved with the maternity services.

Relaxation and Mothercraft Classes

It is pleasant once more to be able to report the increased use of these facilities: 619 mothers (87 more than last year) made a total of 3140 attendances — a tribute to the enthusiasm and expertise of the physiotherapists and health visitors alike. In 1971 reference was made to the need to transfer the session from a local church hall to Thorpedene Clinic. It continued to function there for a total of 22 months. While the amenities of the Clinic were much enjoyed, the journey there for expectant mothers from the Central area of the Borough was admittedly inconvenient and expensive. At the beginning of December 1972, it became possible to take over part of the former adult training centre at Warrior Square for this purpose.

Hospital Maternity Services Liaison Committee

This Committee, under the Chairmanship of Mr. W. Keith Sutton, F.R.C.O.G., continued to meet. Its deliberations on all aspects of the maternity services were as helpful as ever to all those concerned.

Congenital Malformations

Notification by the maternity unit at Rochford Hospital and by domiciliary Midwives of congenital defects found at birth, which is complete and satisfactory, is confirmed by subsequent enquiry at a later date and a periodic report is sent to the General Register Office. In appropriate cases, the child's name is placed on the Observation Register for periodic follow-up.

Maternal Mortality

There were no maternal deaths recorded during the year 1972. Thus the total since 1957 remains at 9.

Stillbirths and Infant Mortality

The number of Stillbirths during the year (27) gives a ratio of 15 per 1000 total births which is rather more than the provisional national figure.

The number of infant deaths, i.e. under 1 year, was 29, giving a rate of 15 per 1000 live births against a provisional national figure of 17 per 1000 live births of these 29 who died in the first year, 20 died within the first week of life and a further 4 within four weeks of birth.

Combining the stillbirth figure with figures for death within the first month of living gives a peri-natal mortality rate of 23 per 1000 total births against a national figure of 22.

REPORT OF THE PRINCIPAL DENTAL OFFICER

Pre-School

The dental treatment carried out for these children is shown on the attached table of treatment.

During the year in an effort to reduce the number of these children attending for toothache, I wrote to all the Nursery Schools in the Borough explaining the problem, and my wish to interest parents and children in prevention by talking to parents and carrying out inspections. Unfortunately only 10 schools showed interest, but one must hope for a steady, though modest improvement. This year was the first one during which a recall system was in operation and this helped to increase the number of children seeking regular check-ups.

As can be seen from the treatment table there was a slight increase in the number of children requiring and receiving treatment.

Total visits	Teeth filled	Teeth extracted	Emergencies	First Inspection	Offered Treatment
114	123	142	10	435	159

Maternity Service

Expectant and Nursing Mothers are still referred to the Dental Department via the Ante-natal Clinics. Unfortunately the demand for dental treatment from the Local Authorities Dental Service seems to be on the decline. I am assured that those patients who will have dental treatment, are attending their own dental practitioners in the town. This is perhaps good as it gives continuity of treatment for mothers, which we cannot give due to regulations in force at the time of writing this report.

REPORT OF DISTRICT NURSES, MIDWIVES AND HEALTH VISITORS 1972

1972 was a year of change in the Nursing Services, the Mayston Structure was implemented.

Miss D. Heaton, S.R.N., S.C.M., H.V.Cert., Q.N. was appointed Director of Nursing Services from April 1st. Previous appointment Superintendent District Nurses and Midwives, Southend-on-Sea.

Mrs. M. Gower, S.R.N. H.V.Cert., was appointed Area Officer for Health Visiting from April 1st. Previous appointment Superintendent Health Visitor, Southend-on-Sea.

Miss F. L. Blackburn, S.R.N., S.C.M., H.V. Cert., was appointed Area Nursing Officer for District Nursing and Midwifery from July 1st. Previous appointment Senior Health Visitor and Group Advisor, Southend-on-Sea.

Miss J. M. Kimpton, was appointed first line manager for Midwifery from August 1st. Previous appointment Deputy Superintendent District Nursing and Midwifery, Southend-on-Sea.

Mrs. R. Clark and Mrs. E. Robinson, were appointed first line managers for District Nursing from August 1st. Previous appointments Senior District Nurses and Practical Work Instructors, Southend-on-Sea.

Miss P. Reeves, was appointed first line Manager for Health Visitors, Prior to this appointment she was a Senior Health Visitor and Field Work Instructor, Southend-on-Sea.

SECTION 23 - MIDWIFERY SERVICE

There was very little change in this field of work during 1972. Mrs. Laker resigned in July, Miss Mann replaced her on January 1st 1973.

The usual 2 year inspection was carried out by Miss Cox from the Central Midwives Board in February.

Twice during the year, midwives attending the statutory midwives refresher course held in Westcliff, organised by the Royal College of Midwives, visited the community.

12 Student Midwives completed Part II midwifery training.

Miss Kimpton, Nursing Officer, and 2 midwives attended statutory refresher courses.

Owing to a period of staff shortage at Rochford Hospital Maternity Unit the midwives conducted more home deliveries total 366, an increase of 37 on the previous year.

Mothers discharged from hospital before the 10th day and nursed by midwives totalled 1045.

During the year 15,934 nursing visits were made.

5,002 ante natal visits were paid.

Trilene was administered on 220 occasions.

Pethidine and Pethilorfan was given to 240 mothers in labour.

Guthrie tests taken from all infants delivered at home and those discharged early from hospital totalled 1297.

The pocket radios are still invaluable.

The greatest success of the year was the introduction of prepacked sterilised delivery bags, packed at Shoebury Health Centre C.S.S.D. and sterilised at Southend General Hospital. These bags are used and much appreciated by all the midwives.

SECTION 24 - HEALTH VISITING

On January 1st Mrs. M. Gower was appointed Superintendent Health Visitor and later the designation was Area Nursing Officer for Health Visitors.

In September Miss P. Reeves was appointed first line nursing officer for health visitors.

Mrs. Wain and Mrs. Hoskins student health visitors successfully completed their training and were appointed health visitors.

In order to record the ratio of health visitors as recommended by the D.H.S.S. 5 student health visitors are at present in training. The establishment should be 39, the current establishment is 19.

Mrs. Thorlby resigned for domestic reasons and Miss Doreen Whapham returned to work as a field work instructor.

The attachment of health visitors to G.P.'s had proved successful and it is hoped that all the health visitors will be attached by the end of 1973.

SECTION 25 - DISTRICT NURSING

Work continues to increase which is undoubtedly due to all nurses being attached to G. P. practices and patients being discharged early from hospital.

Visits paid	126,769
New cases	7,046
Visits to over 65's	90,412
Visits to under 5's	392

The nursing establishment was increased by 2. Three nurses resigned, one left the area, another transferred to health visiting section and is now undertaking H.V. Training.

3 Nurses undertook district nursing training with success.

The bathing attendant service continues to be very much appreciated, as does the Marie Curie night nursing service, 27 patients being nursed.

Students from the local hospitals continue to visit the Borough for observation visits.

The demand for incontinent pads has increased.

Pocket radios are invaluable to the few nurses who use them and we welcome the day when they will be available to all nurses.

Mrs. R. Clark Nursing Officer was presented with the long service award from the Queen Mother at St. James Palace in November. These badges are awarded annually by the Queen's Institute of District Nursing for 21 years service.

**Shoeburyness
Health
Centre**

Miss M. O'Connell S.R.N., S.C.M., was appointed supervisor of the Centre on January 1st 1972. She very quickly began organising the C.S.S.D. 2 more part-time S.E.N.'s were appointed to assist her. In June she was ready to start a pre-packed delivery bag service for the midwives and vaccination and immunisation packs for Warrior Square Clinic. It is envisaged that all district nurses will be using pre-packed sterilised dressings by May 1973.

**School
Nursing**

The school nurses are continuing with screening programmes as well as routine medical work. The school clinic remains well patronised, with verruca clinics and prophylactic immunisations.

**Health
Education**

Continues to expand under Miss Staunton's guidance. There are now four health visitors involved in health education programmes in schools and counselling.

Mothercraft and relaxation classes are expanding and the midwives are now involved in the teaching, thus giving the patients the benefit of a wider range of skills, and the concept of the team approach to patient care.

**Management
Courses and
Conferences**

Miss Heaton attended a four week specially advanced management course at York University in March.

Miss Kimpton attended a first line management course at Chiswick in June. Two district nurses attended one weeks refresher course at Newham in November.

Miss Heaton attended a one day community care conference in London in January, the Marie Curie one day synopsis in London in May, a one day synopsis at Orsett Hospital in September and also a one day conference at Church Hall, Westminster on the Asa Briggs Report in September.

Miss Heaton and Mrs. Gower attended the health visitors annual meeting and conference at Scarborough in November.

Mrs. Gower and Miss Blackburn attended a one day conference on the Asa Briggs Report at the North East Polytechnic in London in November.

SECTION 26 - VACCINATION AND IMMUNISATION

The two additional sessions at the Municipal Health Centre arranged early in 1971 were discontinued in March 1972. Otherwise, sessions there and at the peripheral clinics remained unaltered.

There was an overall reduction of 8% in the number of primary courses of immunisation (other than against rubella) completed, virtually solely due to decreased attendances at the Council's clinics. This is to be expected, because in the preceding year every effort had been made to protect children who had either defaulted during a course or who had not been presented initially.

The number of the reinforcing doses fell from 6921 to 6349. Those performed at the clinics rose from 3159 to 3303, those given by general practitioners falling by 706 to 3056.

Vaccinations against rubella showed a predictable decrease (from 3085 to 928). In 1971 vaccination had been offered to girls aged between eleven and thirteen years; having completed the backlog, it was possible in 1972 to deal mainly with the eleven year olds, a procedure which will be repeated annually.

Reference was made last year to Circular C.M.O. 12/71 advising the discontinuance, as a routine procedure, of vaccination against smallpox. Primary vaccinations of children under 15 fell from 1471 to 498 and re-vaccinations from 411 to 192.

**Vaccination of
Travellers
proceeding abroad**

Protection against cholera, typhoid, tetanus, yellow fever and smallpox continued to be available. Each year the demand for these procedures increases. In all, 1617 vaccinations were performed, compared with 1424 and 1307 in 1971 and 1970 respectively.

SECTION 27 - AMBULANCE SERVICE

Administration was carried out as in previous years, and the appended tables show how the work was shared by the various services involved.

No startling statistical change is revealed. The total road mileage shows a decrease of 2.8% and the total number of patients conveyed fell by 2.6%. 67% of all patients were conveyed by cars of the Hospital Car Service and the Council's central transport pool, accounting for 71% of the total mileage run.

On four occasions during the year patients with severe spinal injuries were transferred by helicopters of the Royal Air Force from Southend General Hospital to special units at Lodge Moor Hospital, Sheffield and Stoke Mandeville Hospital, Aylesbury. The cost of the four journeys totalled £801.

The Ambulance Cost Statement provided by the Department of Health and Social Security for the financial year ended 31st March 1972, shows in comparative form financial and statistical details relating to all Ambulance Services in England.

The average cost per 1000 population for all 78 English County Boroughs was £823. The equivalent figure for Southend was £581. Only three other County Boroughs (Reading, Bolton and Worcester) show a lower cost per 1000. It is interesting to note that Brighton, with a population (160,000) equal to that of Southend, and comparable in other ways, shows a cost per 1000 population of £956, 64.5% higher. The average cost per 1000 population for all English County Boroughs increased by 18%, compared with 13% during the previous year, whereas Southend's cost per 1000 increased by only 10.5% compared with 9.8% the previous year.

Taking all 78 County Boroughs, the average cost of conveying one patient during the year was £1.48. The equivalent figure for Southend was 92p. **Only** three other County Boroughs (Bradford, Northampton and Barrow-in-Furness) show a lower figure.

SECTION 28 - PREVENTION OF ILLNESS, CARE AND AFTER CARE

(Tables 31 - 33)

Tuberculosis

Dr. E. G. Sita-Lumsden reports that 483 new contacts were examined at the Chest Clinic during the year, of whom five were found to be suffering from tuberculosis. Contacts of patients made 994 attendances.

There were 21 households in the borough in which an individual was known to be excreting mycobacterium tuberculosis at some time during the year.

- (a) 17 were positive for the first time.
- (b) 1 was a relapsed patient known to have been positive in the past.
- (c) 3 were known positive cases.

The reponses were :-

- (a) 11 were rendered sputum negative; 3 remained positive and 3 died.
- (b) 1 was rendered sputum negative.
- (c) 2 were rendered sputum negative and 1 remained positive.

Although there is rarely any difficulty in securing immediate admission to hospital for patients who require it, there are some for whom care at home, for at least part of the illness, is desirable. The success of home treatment owes much to the Home Nursing Service which paid 951 home nursing visits during the year to a total of 20 patients. A daily issue of 1 pint of milk was made to 5 patients, the same number as in the previous year; 1187 visits were paid by Mrs. C. Wilson, Tuberculosis Health Visitor, who also made 361 visits to patients with other chest diseases and attended an average of 5 sessions at the clinic each month.

Tuberculosis After-Care Committee

This Committee which is composed of members nominated by the Health Committee and by the Southend-on-Sea and District Guild of Help, continued to meet and give financial assistance to a small number of cases.

The expanded terms of reference of this Committee continued in operation throughout 1972 but despite several letters to Local G.P.s, Social Services Department, to District Nurses, and Voluntary Organisations in the town, all of whom were advised of the increasing scope of the Committee, it is very disappointing to report that only a very few new cases came to light.

I am indebted to the Guild's Secretary, Mr. Colin George, for the following information and statistics.

With the additional sum of money made available for patients suffering from some chest complaints other than tuberculosis, there was an increase in the number of grants made from the Tuberculosis After-Care Fund. This indicated by the attached figures which show an increase of expenditure for the year of £28.67 although only one more patient was helped than in 1971.

The Guild have been pleased to co-operate for yet a further year in administering this fund on behalf of the Tuberculosis After-Care Committee.

Type of Assistance	No. Assisted	Cost
Fares for visiting Hospital	1	£4.80
Fuel	1	2.00
Rent	1	6.50
Clothing	3	25.19
Water Rate	1	5.99
Christmas Gifts	8	24.00
Total No. of cases assisted	9	<u>£ 68.48</u>

B.C.G. VACCINATION

Contacts

A total of 34 children and close relatives of patients suffering from tuberculosis were vaccinated with B.C.G. by the hospital service, 48 fewer than in 1971.

School Children

For over ten years now routine tuberculin skin testing serially in the first three years of secondary school life has taken place. The object of this was to demonstrate the conversion rate from year to year. This rate has decreased from 0.73% in year two and 0.80% in year three in 1965 to 0.29% in year two and 0.25% in year three in 1971. The serial testing therefore has proved its usefulness and is to be discontinued at the end of the year. Following that, Heaf testing will be offered in year three only with B.C.G. vaccination to follow were indicated.

This year therefore pupils in the first three years of secondary education were as usual offered the Heaf test by the Authority. Acceptance rate this year changed marginally from 93.8% to 93.9%, the natural positive rate fell from 1.32% to 1.02%. The conversion rate remained unchanged at 0.27%. Subsequent to the skin test, X-ray examination was arranged for grade 2, 3 and 4 reactors, a facility also extended to the families of the two latter groups. Pupils from four private schools were included in the B.C.G. vaccination scheme; 43 were tested, one of whom gave a natural positive reaction. Of this school population 2.4% had already been vaccinated with B.C.G.

Pupils who have been vaccinated previously are Heaf tested in their third year so as to defer any re-vaccination which may be required until they are about to leave school to enter an environment where the risk is increased. Of pupils who had been vaccinated, one produced a grade 3 reaction and two grade 4. Seven pupils who had again become skin negative were revaccinated.

CHIROPODY SERVICE

The scheme for the treatment of patients by chiropodists in their own Surgeries continued and the success of the scheme, is I think measured by the increase in the number of patients being treated and the waiting time for new patients is only 2/6 weeks.

It is, however, hoped to give more treatment per year or ultimately to bring down the age limit from 69 years.

The chropodists taking part in the scheme as at the 31st December 1972 were :-

Mr. W. A. Allaway, L.Ch., 716 Southchurch Road, Southend-on-Sea.
 Mr. J. Hyams, M.Ch.S., 106 Valkyrie Road, Westcliff-on-Sea.
 Mr. L. J. Moore, L.Ch., 7 Alexandra Street, Southend-on-Sea.
 Mrs. S. Smith, M.Ch.S., 64 Snakes Lane, Southend-on-Drs.
 Mr. J. C. Taylor, M.Ch.S., 9 East Street, Prittlewell, Southend-on-Sea.
 Mr. A. E. B. Gauden, M.Ch.S., 6 Elmer Avenue, Southend-on-Sea.
 Mr. J. E. Young, M.Ch.S., Domiciliary only.
 Mr. P. P. Samuels, M.C.S.P., S.R.P., M.Ch.S., S.R.Ch.,
 233a Southbourne Grove, Westcliff-on-Sea.
 Mr. R.H. Reid, M.Ch.S., Shoebury Health Centre
 (Home Address :- 11 Burgess Close, Thorpe Bay)

	<u>Clinic/Surgery</u>	<u>Domiciliary</u>	<u>Total</u>
No. of treatments given	7315	2452	9767
No. of persons treated	1738	867	2605

ILLNESS GENERALLY

Home Nursing Requisites

Requisites most commonly in demand are supplied on loan by the local division of the St. John Ambulance Brigade, to which the council make a grant of £100 each year towards the cost of the equipment.

The details of equipment loaned has been given to me by Superintendent Harris and will be found in table form at the back of the book.

(See Table 23)

CERVICAL CYTOLOGY

4 clinics per month with 2 doctors attending each on average were held at Westborough Road Clinic. At the end of the year an extra session at Thorpedene Clinic was started with the object of reducing the waiting list of women who since it was five years from the date of their first test were now due for a repeat. For the first hour at this clinic only, the opportunity was given for any women eligible for a test to have one without previous appointment.

<u>First attendances</u>	<u>Repeats</u>	<u>Failed to attend</u>
945	173	279

Total appointments made 1174

The clinics were kept busy mainly because the women who had come forward with enthusiasm when the clinics were first opened were anxious to have their repeat tests. There is concern that the clinics are not attracting those women now eligible for test and who have not yet had one.

Our records show that of the women seen at our clinic this year one case of cancer of cervix was diagnosed. 45 women were asked to return because of histological examination there was evidence of some changes which were potentially pathological. 32 were found to have inflammatory lesions (unspecified cause) 11 were reported to have Trichomonas infection and 8 Monilia infection 22 were re-examined because of previous abnormal findings.

The women were advised on a variety of gynaecological complaints including irregular bleeding and discharge. On clinical examination pathology of a wide range was detected including ovarian cysts, fibroids, erosion of cervix, polypus, prolapse and lumps in breast, they were referred to their General Practitioner for further advice, continued supervision or referral to hospital. In many cases referral for further family planning advice was also made.

**NATIONAL HEALTH SERVICE ACT 1946 PART IV
GENERAL MEDICAL AND DENTAL SERVICES
PHARMACEUTICAL SERVICES & GENERAL OPHTHALMIC SERVICES**

EXECUTIVE COUNCIL

The Services provided under Part IV of the National Health Service Act 1946 are controlled by the Local Executive Council, a body appointed by the Secretary of State, Department of Health and Social Security. Certain members of the Council serve on it, and there is a very pleasant relationship between these bodies.

**Medical
List**

On the 31st March the names of 89 doctors were included on the Executive Council's Medical List as set out below :-

(a)	Principals for whom this Council is responsible	73
(b)	Principals for whom other Councils are responsible	15
(c)	Principals with limited lists for whom this Council is responsible	1
		<hr/> 89
(d)	Principals providing Maternity Medical Services for whom this Council is responsible	63
(e)	Principals providing Maternity Medical Services for whom other Councils are responsible	6
		<hr/> 69

**Classification of
Practice Areas**

The Council's practice areas with their classification are as follows :-

Practice Area	Classification
Southend-on-Sea and Thorpe Bay	Open
Westcliff-on-Sea	Open
Leigh-on-Sea and Eastwood	Intermediate
Shoeburyness	Open

**Person on
Doctors Lists**

The Estimated population of the County Borough of Southend-on-Sea on the 1st July 1972, was 163,380 compared with 162,420 last year. The number of persons registered with Medical Practitioners at that date was 171,571 as compared with 171,519 the previous year.

**Pharmaceutical
List**

On the 31st March the number of Chemist Contractors included in the Councils Pharmaceutical List was as follows :-

Pharmacies	43
Appliance Suppliers	13
	<hr/> 56

Dental List

On the 31st March the number of dentists included in the Council's Dental List for the purpose of providing general dental service under the National Health Service was 47.

Replacement of Dental Appliances

Applications from 22 persons for the replacement of dental appliances were considered during the year. The decisions taken and the amounts payable by the patients and by the Council were as follows :-

	Number of Cases
(a) Whole cost to be borne by Council	15
(b) Whole cost to be borne by patient	—
(c) Part cost to be borne by patient	7
	<hr/> 22 <hr/>

Ophthalmic List

On the 31st March the following were included in the Council's Ophthalmic List :-

Ophthalmic Medical Practitioners	6
Ophthalmic Opticians	22
Dispensing Opticians	11

Sight Tests

The number of Sight Tests paid for over the last two years was 31,959 in 1971-72 and 33,549 in 1972-73.

INFECTIOUS DISEASES

(See Table 34)

Comment

There was no major outbreak of epidemic disease during this year. National figures showed a drop in total notifications of infectious diseases; perhaps related to a mild winter, which was reflected in Southend. 410 against 557.

There was a substantial decline in the number of cases of Whooping Cough Measles and Food Poisoning. The only diseases which did not follow this pattern were Scarlet Fever and Infective Jaundice. Both these showed an increase.

**Tuberculosis
(See Tables 35-38)**

Dr. E. G. Sita-Lumsden, the Consultant Physician, and the staff of the Chest Clinic have been kind enough to furnish much of the information presented in this section.

Notifications

- (a) **Respiratory** Persons notified totalled 26 of whom 14 males and 7 females were Southend residents. Primary notifications were two fewer than in the previous year. There were five inward transfers, six fewer than in 1971, but these necessarily vary from year to year and are outside the control of preventive measures. There were two posthumous notifications during the year, one male and one female.

(b) **Non-respiratory** There was one primary notification — of T.B. synovitis of knee - in a male in the 25 to 35 age group.

Deaths

There were three male and again no female deaths from this respiratory disease, being one male death more than last year. There was one female death recorded from non-respiratory conditions. Details of these deaths are given below.

Respiratory

Male aged 67. Notified 1953 in Kent. Removed to Southend in October 1961. Under continuous surveillance until October 1971. Death occurred in July 1972 in Wales.

Male aged 68. Posthumously notified.

Male aged 72. Notified three days before death

Non-respiratory

Female aged 78. Posthumously notified.

Venereal Diseases

Dr. R. Spitzer, Consultant Venereologist has been most helpful and once more supplied the statistics relating to work carried out at the hospital clinics.

	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
New Cases Syphilis (Southend)	9	16	14	6	6	7	8	8	4	3
New cases Gonorrhoea (Southend)	132	119	98	77	92	56	98	130	56	104
Total Attendances (Southend & Essex)	2248	2147	2044	2284	2565	2350	3111	3192	4408	6120

Crematorium

During the year 3121 cremations were carried out at the Southend-on-Sea Crematorium

Children in Need

Joint Circular July 31st 1950.

Ministry of Health Circular 27/54 "Prevention of Break-Up of Families".

The work of this Conference has shown very little change although our meetings have been as useful as ever.

The work of this Conference which takes place every week has shown a trend towards child abuse in view of the development of a co-ordinated service in relation to battered babies. During the year 71 families were considered by the Conference involving 1100 agenda items.

FAMILY PLANNING

Clinics continue to be held as in passed years, and I understand attendances are as good as ever. Unfortunately figures showing attendance rates have not been forwarded in time for inclusion in this report.

PUBLIC HEALTH AIRCRAFT REGULATIONS 1966
ALIENS ORDER 1953
COMMONWEALTH IMMIGRANTS ACT 1962 and 1969

AIRPORT

(See Table 39)

Medical Officers of the department have duties under the Public Health (Aircraft Regulation) Act to ensure that infectious disease is not disseminated by passengers, aircrew or aircraft. With ever increasing travel and speed of travel airports are likely sites for importation of infectious disease. An outbreak overseas may call for added vigilance, screening of passengers and arrangements for emergency vaccinations or immunisations at airports and follow-up passengers and crews. The co-operation of immigration officers, customs and excise officers and airport staff is always forthcoming and greatly appreciated.

In 1972 cholera continued to be reported from the Middle East and spread across Africa to the West Coast. The actual numbers of infected countries is suspected of being higher. Vigilance against spread of this disease and other diseases was maintained at the airport and extra work was involved due to long haul charter flights from the Far East and Africa.

The table at the end of the book relating to customs movements of aircraft and passengers does not include internal flights within the United Kingdom. There was a decrease from the previous year, aircraft movement being 14861 compared with 21,507 in the previous year. Passenger movements were 315,804 as compared with 446,690 in 1971.

The medical staff of the Health Department hold warrants as Medical Inspectors of Aliens and Commonwealth Immigrants, as do a panel of General Practitioners who normally carry out these duties, remunerated in accordance with a scale of fees when they are summoned to the airport, either by the immigration officers in respect of these statutory duties or by the airport control staff in respect of calls for medical aid in cases of accident or illness. Warrant holders made 57 attendances at the airport to examine 228 commonwealth immigrants and 81 aliens.

MEDICAL REPORTS

(See Table 40)

Examinations

The number of examinations carried out was 445 an increase on last years figure of 439.

Questionnaires

This year 1506 questionnaires were scrutinised by the Medical Officers, 226 more than last year. Very few candidates were found to be medically unsuitable for the posts for which they applied. The questionnaire serves not only to protect the local authority, but also affords medical officers an opportunity to advise certain applicants as to more suitable occupations consistent with their physical or mental state. The number of special sick pay reports increased from 50 to 80.

NURSING HOMES

Homes on register at end of year	Number of beds provided
Avenue	13
Aylward	16
Langley Lodge	23
Lulworth Court	20
Oak House	16
Trenow House	16
Two ways	7
Maternity Homes — Nil	
	111

ENVIRONMENTAL HEALTH SERVICES

Mr. E. A. Ellis, M.A.P.H.I., M.R.S.H., Chief Public Health Inspector reports :

Staff

During the year a reorganisation of the technical staff took place to improve the efficiency of the Section and to ensure adequate coverage of the many functions discharged. The duties of a public health inspector now cover such a wide field that it is difficult for one officer to be up-to-date with a detailed knowledge of each facet. Three Divisions were therefore set up, each in charge of a Senior Inspector, one dealing with food sampling and hygiene, one with housing matters and one with environmental health. In addition, one Technical Assistant specialises in the legislation relating to offices and shops.

The change has proved to be advantageous but a shortage of public health inspectors makes it impossible to visit some premises as frequently as is desirable or to carry out research and investigations into matters connected with environmental health.

Environmental Health

This division deals with nuisances which arise by reason of dwellings not being kept in good repair, noise, dust and fumes from manufacturing processes, animals not being kept properly and vermin. Generally the problems are resolved informally but in 53 cases during the year it was necessary to serve statutory notices requiring repairs to be carried out to tenanted houses. In one case legal proceedings had to be taken to enforce compliance with notices and in two cases works of repair had to be undertaken by the Corporation and the cost made a charge on the property.

The division also deals with the control of communicable diseases, the investigation of cases of food poisoning, checking the chemical and bacteriological purity of the water in the swimming pools in the Borough, inspection of factories, atmospheric pollution and the control of caravan sites.

Rodents

Of the 606 rodent infestations treated during the year over 60% involved mice. There has been a noticeable increase in the number of mice infestations in recent years, this trend being apparent both locally and nationally. In Southend, Alpha Chlorolose is used for treating mice infestations and this poison is the one most commonly used since the problem of Warfarin resistance in mice became apparent. This form of treatment induces hypothermia in the rodent and is, therefore, most effective if the ambient temperature is kept below 60°F.

Pigeons

A private contractor employed by the Corporation to control the number of pigeons so as to prevent nuisance from this source, removed 240 pigeons from the town centre area by means of trapping and taking from roost.

Atmospheric Pollution

The most common cause of complaint regarding atmospheric pollution is bonfires and each case is investigated by a public health inspector and generally resolved without recourse to formal action.

Daily measurements of the pollution of the atmosphere by smoke and sulphur dioxide are made by means of a filter apparatus sited at Westcliff Hospital. During the last four years pollution of the atmosphere by smoke has fallen by 30% and pollution by sulphur dioxide has fallen by 10%.

Control of Communicable Disease

This work entails the following up of immigrants to this Country and paying particular attention to those who come from areas where certain diseases are endemic or areas declared to be infected areas by the World Health Organisation. British residents returning from holiday or business trips abroad are also checked if they show any symptoms or have been in contact with communicable diseases.

With certain conditions it is necessary to keep under surveillance persons who may become carriers of disease whilst not themselves exhibiting symptoms. One such case was under surveillance during the year and steps were taken to remove risk of the infection being passed on by providing alternative sanitary accommodation and by immunising the other residents in the house.

During the year a number of persons employed in the food industry temporarily discontinued work whilst they were in contact with a case of food poisoning.

Housing Division

This Division carries out inspections of properties which are the subject of applications for improvement grants or qualification certificates to ensure that they are in good repair. It also deals with inspections of dwellings which are likely to be the subject of closing or demolition orders. Two such orders were made in 1972. During the year the Clearance and Compulsory Purchase Orders in respect of the John Street and Rampart Street area were confirmed by the Secretary of State for the Environment.

The supervision and regular inspection of 246 houses in multiple occupation is also carried out by this division. 55 such houses are the subject of directions which lay down the permitted number of occupants, having regard to the amenities available. Without constant supervision conditions in some houses in which furnished rooms are let separately could rapidly deteriorate and overcrowding and insanitary conditions could occur.

Food Division

This division is responsible for the inspection of the 1705 food premises in the County Borough, for dealing with complaints concerning food and for sampling all types of food and drink for chemical and bacteriological analysis.

Food Complaints

173 Consumer complaints involving food and drink were received during the year. A third of this total involved foreign matter in food which generally is indicative of some breakdown in the hygienic handling of the product during the course of production. Of the remainder 34 involved unsoundness of the food and 18 complaints concerned mouldy food. These numbers should be greatly reduced when open date coding is introduced as both the retailer and the housewife will be in a position to ascertain the age of the product particularly with reference to the short life perishable products. Of course this is only one link in the chain of handling such foods and the methods of transportation and storage, particularly in relation to temperature control, has a great influence on the eventual condition of the product at the time of sale.

60 of the complaints resulted in prosecution of the vendor or manufacturer involved and the fines imposed totalled £1339 plus costs of £607. The cases which were the subject of legal proceedings are listed below :-

No.	Offence	Fine	Costs
5/72	Foreign Body in Packet of Sweets	£50.00	£10.00
10/72	Foreign Body in empty milk bottle	£20.00	£ 5.00
11/72	Metal Object in Loaf	£20.00	£10.00
13/72	Dirty Bottle of Milk	£20.00	£ 5.00
14/72	Foreign Matter in Tea Cake	£10.00	£ 3.00
22/72	Unsound Tin of Fruit	£20.00	£ 3.00
23/72	Foreign Bodies in Bag of Flour	£20.00	£ 5.00
24/72	Mouldy Tomato	£15.00	£ 3.00
26/72	Dirty Milk Bottle	£20.00	£ 3.00
27/72	Foreign Matter in Biscuit	£20.00	£ 3.00
28/72	Contaminated Packet of Cereal	£20.00	£10.00
31/72	Metal in Sliced Loaf	£20.00	£ 5.00
32/72	Cigarette in Tin of Strawberries	£35.00	£ 5.00
33/72	Matchstick in Bath Bun	£14.00	£ 3.00
38/72	Dirty Milk Bottle	£20.00	£ 5.00
41/72	Hair in Cream Trifle	£20.00	£ 2.00
45/72	Finger Dressing in Minced Beef	£35.00	£ 7.20
48/72	Wire in Sweet	£25.00	£10.00
50/72	Insects in Orange and Rosehip Syrup	£20.00	£ 5.00
52/72	Mouldy Pork Pies	£25.00	£ 5.00
60/72	Foreign Object in Sausage	£25.00	£ 5.00
66/72	Fresh Milk Concentrate in Sour condition	£20.00	£ 5.00
68/72	Strip of Wood in uncut loaf	£20.00	£ 5.00
76/72	Insect in Loaf	£25.00	£ 5.00
79/72	Mouldy Prunes	£10.00	£15.00
81/72	Dirty Milk Bottle	£20.00	£ 5.00
87/72	Mouldy Blackberry and Apple Pie	£20.00	£10.00
88/72	Mouldy Blackberry and Apple Pie	£20.00	£10.00
90/72	Insect in Minced Beef and Onion Pie	£25.00	£15.00
91/72	Mouldy Pork Pie	£25.00	£15.00
92/72	Foreign Body in Milk Bottle	£20.00	£15.00
93/72	Mouldy Loaf	£15.00	£19.80
94/72	Mouldy Sausage Roll	£20.00	£15.00
95/72	Insect in Loaf	£20.00	£15.00
96/72	Mouldy Loaf	£25.00	£15.00
107/72	Foreign Body in Milk Bottle	£30.00	£ 5.00
113/72	Sediment in Stout	£30.00	£15.00
114/72	Cigarette Butt in Frozen Peas	£25.00	£15.00
117/72	Piece of Wood in Cream Sponge	£20.00	£10.00
118/72	Insect in Sausage Roll	£15.00	£10.00
120/72	Mouldy Bread Rolls	£20.00	£10.00
122/72	Foreign Body in Sliced Loaf	£20.00	£10.00
123/72	Foreign Body in Sliced Loaf	£20.00	£10.00
127/72	Foreign Body in Frozen Beans	£20.00	£15.00
128/72	Maggot in Fruit and Nut Caramel	£20.00	£15.00
131/72	Maggot in Lasagne Di Bologna	£20.00	£15.00
132/72	Bandage in Steak and Kidney Pie	£30.00	£10.00

No.	Offence	Fine	Costs
134/72	Foreign Object in Tin of Rice Pudding	£30.00	£15.00
136/72	Two Mouldy Date Slices	£20.00	£15.00
138/72	Dirty Milk Churn	£25.00	£15.00
143/72	Decomposed Tinned Carrots	£30.00	£15.00
145/72	Foreign Body in Packet of Cereal	£40.00	£15.00
146/72	Fly in Tea Scone	£25.00	£15.00
148/72	Mouldy Scotch Egg	£30.00	£15.00
149/72	Sour Single Cream	£20.00	£15.00
151/72	Fly in Packet of Biscuits	£25.00	£10.00
156/72	Foreign bodies in uncut loaf	£20.00	£15.00
162/72	Insects in porridge	£10.00	£15.00
166/72	Chewing Gum in Puff Pastry	£25.00	£15.00
172/72	Foreign body in Jelly	£10.00	£15.00

Complaints of interest included a packet of cereal contaminated with cat urine which did not become apparent until the unfortunate complainant had taken a mouthful of the food. The contents of another packet of cereal (a different type) were thought to have been attacked by rodents but investigation revealed that the damage had occurred at the time of packaging due to the prepared cereal being out of alignment on the packaging machine.

A housewife prepared a sweet course consisting of a caramel blancmange to which she added sultanas. She could not believe her eyes when the resultant mixture turned a bright green colour. The cause of this disconcerting incident was found to be due to the presence of sulphur dioxide in the sultanas. However, as the amount of sulphur dioxide was well within the permitted limit the case called for no further action by the Council.

A complaint was received from the management of the local swimming pool to the effect that two bathers had been sick shortly after consuming soft drinks from a dispenser on the premises. The use of the dispenser was discontinued and samples of all the alternative beverages revealed that the carbonated water was contaminated with copper. The cause was traced to a defect in the carbonisation plant resulting from corrosion. This defect was rectified by the manufacturer of the dispenser unit and satisfactory follow up samples were obtained before the dispenser was allowed to be used again.

Sampling

a) Analysis and Labelling

Of the 371 formal and informal samples submitted to the Public Analyst for examination three only were unsatisfactory.

A sample of raspberry red food colour was found to contain ponceau MX food colour which the Colouring Matter (Amendment) Regulations 1970 prohibits from use in food stuffs. The remainder of the stock in the shop in question was surrendered and no other stocks of this item were found on sale within the Borough. The two other unsatisfactory samples involved a coffee product which resulted in legal proceedings being instituted against the importer.

b) Bacteriological Sampling

Milk

All the 263 samples of milk submitted for bacteriological examination satisfied the phosphatase test which is indicative of adequate pasteurisation. In addition, the methylene blue reduction test is carried out on the same samples and this indicates the keeping quality of the milk. Ten of the samples failed this test but five of these were taken from churns and incomplete cleansing of the churns prior to the introduction of the milk could have contributed to the unsatisfactory results. In all cases satisfactory follow up samples were obtained.

Milk Containers

Occasional check samples were taken from the bottle washing plants at the two dairies and in addition the efficiency of the churn washing technique was checked by submitting churn rinsings for bacteriological examination.

All of these samples proved satisfactory.

Ice Cream

During the summer months a tremendous quantity of ice cream is sold through the multitude of retail outlets in the County Borough especially along the sea front and in the vicinity of the High Street. A high proportion of this ice cream is of the soft variety and is manufactured at the point of sale in the continuous extruder type of machine. Whilst this type of ice cream is undoubtedly popular, the method of production does increase the risk of contamination of the product unless the operators are forever diligent in the day to day cleaning of the appliances. In addition, there are five ice cream manufacturing premises within the District and samples are taken from these different sources, particularly during the summer season.

The samples are subjected to the methylene blue reduction test and of the 208 submitted, the vast majority were satisfactory. Only six of the samples taken from the ice cream manufacturers were unsatisfactory and no recurring failures were encountered.

Pesticide Residues in foodstuffs - Sampling Scheme

The third scheme for sampling foodstuffs to check specifically for the presence of pesticide residues was carried out during 1972.

As for the two previous schemes, the country was divided into zones and a cross section of all foodstuffs likely to be contaminated by pesticides were sampled in each zone. The resultant analyses by the respective public analysts are correlated and the conclusions reached are based on the country-wide pattern. The consensus of opinion after the earlier schemes suggested that the contamination was generally within acceptable limits. The method adopted earlier produced worthwhile results hence a repeat of the formula on this occasion but with a change of emphasis on the foods sampled.

Southend's commitment to this overall scheme was to submit eight samples of fish and these included white fish, herrings, prawns, mussels and tinned fish.

The comprehensive report and the conclusions reached on this latest scheme is awaited with interest.

Food Hygiene

7,305 visits were made to all classes of food premises including market stalls and mobiles to check compliance with the relevant food legislation. Whilst in the

majority of cases food traders responded when contraventions were drawn to their attention it was found necessary in one instance to resort to legal proceedings in order to achieve compliance. In this instance, involving a restaurant, the proprietor was fined £200 with £40 costs.

FOOD HYGIENE COURSE

A further course in food hygiene was held in the Autumn at Southend-on-Sea College of Food Technology. The students on this, as on previous courses, are persons engaged as food handlers in a wide sphere of food trades. 31 people enrolled for the course and 26 sub-sequently entered for the examination of the Royal Society of Health's Certificate in the Hygiene of Food Retailing and Catering. 23 of the students were successful.

Cockles

Of 288 samples taken from the cockle processing sheds at Leigh-on-Sea during the year, 25 were unsatisfactory. These unsatisfactory methylene blue results occurred during the summer and autumn months culminating in a detailed investigation involving sampling at each stage of the process in several of the cockle sheds. This investigation revealed the need for more effective cleansing of some of the equipment used and when this problem had been overcome the subsequent results improved, this improvement being maintained to the end of the year.

Water Supplies

The statutory undertaker is the Essex Water Company who abstract water from rivers for the bulk of the supply but a proportion comes from deep wells. All the water is treated and the river water is subjected to a softening process. The water is of a moderate degree of hardness, devoid of plumbo solvency and of a high degree of purity after treatment. Adequate reservoir facilities are available. All but three houses in the County Borough have piped supplies from the mains. The three referred to have well supplies.

Regular samples are submitted for bacteriological and chemical analysis and arrangements have been made for this department to be notified by the Waterworks Company chemist if the nitrate content exceeds the normal.

Fluoridation

No further action has been taken regarding fluoridation of the water supply.

Chironomid Infestation

During the year a number of complaints were received from members of the public regarding 'worms in the water'. These were identified as chironomid larvae and despite remedial measures adopted by the Company by flushing mains and installing devices to control adult infestation of covered reservoirs, the problem persisted throughout the year.

A conference was held at which the matter was considered by representatives of the Department of Health and Social Security, The Water Company, Department of the Environment, the Water Pollution Research Laboratory, the Water Research Association and the Southend-on-Sea Health Department.

A proposal was put forward by the Water Company to install micro-strainers to prevent the passage into the mains of larvae which had passed through the sand filters. It was essential that this be done to prevent reinfestation of the storage reservoirs and mains after they had been cleared of larvae.

At the end of the year these proposals were in the process of being implemented and it was estimated that the work would take four or five months to complete.

STATISTICAL REPORT 1972

FOOD AND DRUGS

Samples Submitted for chemical analysis

General Samples	Informal	370	Unsatisfactory	2
	Formal	1	"	1
Specials (following food complaints)		50		
Testing Pesticide Residues in Food Stuffs		8		

Samples submitted for bacteriological examination

Ice Cream	208	Grade 1	148
		" 2	21
		" 3	18
		" 4	21
Ice Lollies	6	Satisfactory	
Milk			
Methylene Blue Test	263)	Unsatisfactory	10
	)	Void	1
Phosphatase Test	263	Satisfactory	
Turbidity	1	"	
Ultra Heat Treated, Colony Count	3	"	
Bottles, Colony Count	18	"	
Churns, Colony Count	8	"	
Shellfish	286	Grade 1	192
		" 2	70
		" 3	24

Food Inspection

Various foodstuffs surrendered as being unfit for human consumption 11 Tons 13 Cwt. 82 lb.

Slaughter of Poultry Act, 1967

Number of poultry processing premises within the district	3
Number of birds killed	20275
Number of birds condemned	140
Average weekly slaughter	390

Other samples submitted for analysis

Fertilisers and Feeding Stuffs	12
Rag Flock and Other Filling Materials	9
Soil and Sludge	31

FOOD HYGIENE (GENERAL) REGULATIONS 1960

Number of premises to which the Regulations apply:

Bakers and Flour Confectioners	62
Butchers	97
Cafes	256
Canteens	114
Confectioners	219
Dairies	3
Fishmongers	54
Greengrocers	119
Grocers	214
Hotel and Boarding Houses	280
Ice Cream Manufacturers	12
Licensed Premises	125
Miscellaneous	150
	<hr/>
	1705
	<hr/>

REGULATIONS AND LICENSING

Caravan Sites and Control of Development Act, 1960

Sites licenced	2
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Diseases of Animals (Waste Food) Order, 1957

Premises licenced	1
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Food and Drugs Act, 1955 Section 16

Registration for manufacture, storage or sale of ice cream	534
Preparation or manufacture of sausages or potted pressed, pickled or preserved food intended for sale.	323

Milk and Dairies (General) Regulations, 1959

Distributors of Milk	187
Dairies	2
Milk Store	1

Milk (Special Designation) Regulations, 1963-1965

Dealers Pasteurisers Licences	2
Pre-packed Milk Licences	187

Pet Animals Act, 1951

Premises registered	21
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Pharmacy and Poisons Act, 1933

Persons registered	99
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Rag Flock and Other Filling Materials Act, 1951	
Premises registered	16
Riding Establishments Act, 1964	
Premises registered	1
Southend-on-Sea Corporation Act, 1947 Section 148	
Certificate of registration to sell, offer or expose for sale food from a cart, barrow, or other vehicle or from a basket, pail, tray or other receptacle.	26
Southend-on-Sea Corporation Act, 1947 Section 149	
Premises registered for sale of Shellfish	15

INSPECTIONS CARRIED OUT

Statutory Provisions	No. of Visits
Agriculture, Safety Health and Welfare	1
Baker and Flour Confectioners	225
Butchers	581
Cafes and Restaurants	1003
Canteens :	
(a) Factory	45
(b) Schools	93
Caravan and Camping Sites	50
Clean Air Act, 1956 :	
(a) Volumetric apparatus	44
(b) Ind. Plant and Chimney Heights	14
(c) Smoke observations	218
Confectioners	309
Dairies	213
Dirty and Verminous Premises	56
Entomology	68
Factories :	
(a) Power	710
(b) Non-Power	33
(c) Outworkers	14
Fertilisers and Feeding Stuffs	34
Fishmongers	134
Food Complaints	414
Fried Fishmongers	42
Greengrocers	332
Grocers	626
Hotel and Boarding Houses	139
Houses in Multiple Occupation	291
Housing Survey	29
Ice Cream Manufacturers	288
Improvements Grants:	
(a) Discretionary	520
(b) Standard	972

Statutory Provisions	No. of Visits
Infectious Diseases	681
Kiosk	55
Licensed Premises	454
Markets - Food Stalls	403
Noise Abatement Act, 1960	557
Nuisances - Public Health	3801
Offices, Shops and Railway Premises Act, 1968 :	
(a) Office	362
(b) Shop (Retail)	1045
(c) Wholesale Dept. or Warehouse	57
(d) Catering Estab. open to Public	135
(e) Staff Canteens	5
(f) Fuel Storage Depot	6
Other Food Premises	388
Pet Animals Act, 1951	36
Pharmacy and Poisons Act, 1933	20
Qualification Certificates	600
Rag Flock and Other Filling Materials Act, 1951	41
Riding Establishments Act, 1964	14
Rodent Control	2975
Sampling :	
(a) Food and Drugs	119
(b) Bacteriological	439
Schools - Sanitary Accommodation	19
Shellfish	
(a) Sheds	274
(b) Stalls	20
Supermarkets	663
Swimming Pools	222
Unfit Houses	
(a) Individual	25
(b) Underground Rooms	25
(c) Clearance Areas	33
Vehicles - Food Hawkers	229
Water Sampling	142
Miscellaneous	1640
	<hr/>
Total	22983
	<hr/>
The total number of informal notices served in respect of the above	733

FACTORIES ACT, 1961

Cases in which defects were found

	Found	Remedied
Particulars		
Want of cleanliness		
Unreasonable temperature		
Overcrowding		
Inadequate Ventilation		
Lighting		
Ineffective drainage of floors		
Sanitary Accommodation		
(a) insufficient	1	1
(b) unsuitable or defective	7	7
(c) not separate for sexes		
Other offences against the Act (not including offences relating to outwork)		
	<hr/> 8	<hr/> 8

Inspections

	Number of Register	Number of Inspections	Written Notices
(a) Factories in which Sections 1,2,3,4, and 6 are to be enforced by the Local Authority	34	33	1
(b) Factories not included in (a) to which Section 7 applies	513	710	7
(c) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	8		
No prosecutions were necessary			

Outworkers

The Factories Act requires the names and addresses of all persons carrying on certain occupations in their own houses to be notified by the employers. Houses where work is carried on are inspected.

Nature of Work	Work-people
Wearing apparel	56
Plastic toys and fancy goods etc.	21
Cabinet-making	12
Brass work	12
Soft Furnishings	1
	<hr/> 102

HOUSING ACT

Applications received from owners or agents for Qualification Certificate	107
Qualification Certificates granted by the Local Authority after all the conditions had been satisfied	111
Initial inspections carried out in respect of applications received for Standard Grants	210
Initial inspections carried out in respect of applications received for Discretionary Grants	146

Works of Improvement and Repair carried out during 1972 to property in order to satisfy the qualifying conditions under the provisions of the Act were as follows :

Internal Defects		External Defects	
Ascot Heaters	3	Boundary Wall	1
Baths, W/C	23	Brickwork, Pointing,	
Dampness	11	Rendering	75
Doors	29	Dishing Gully	30
Electrical Fittings	3	Doors	24
Fireplaces	6	Fencing	11
Flooring, Skirting Board	38	Gates	3
Flue to Boiler	1	Gutters	27
Plaster	101	Manhole Cover	5
Sinks, Wash-Hand Basin	14	Painting, Wood, Metal	65
Staircase	1	Paths, Paving	26
Water Storage Tank	1	Rainwater Pipes, Gully	13
Woodworm Infestation	5	Roofs	60
Windows (Frames, cills)	355	Soil Pipe	4
		Stairs, Steps	11
		Stopcock, mains	1
		Waste Water Pipe	5
		Windows	68
		Woodwork	21

Installation of Missing Standard Amenities

Fixed bath or shower in a bathroom	27
Sink	9
Wash-Hand basin	29
Hot and cold water supply at a :	
(i) fixed bath or shower	30
(ii) wash-hand basin	41
(iii) sink	23
Water Closet	25

Houses in Multiple Occupation

Number of houses in the Borough which are let as houses in multiple occupation to two or more families 246

Number of houses subject to directions made under Section 19, Housing Act 1961, which limit the number of persons who may be accommodated having regard to the amenities available 55

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Number of premises registered	1754
Number of visits	1610
Notices served	322
Prosecutions	1

CONTRAVENTIONS

Failure to comply with the above Act in respect of the following was brought to the notice of registered premises:

Cleanliness	10
Overcrowding	1
Temperature	105
Ventilation	18
Lighting	22
Sanitary Conveniences	27
Washing Facilities	45
Supply of Drinking Water	16
Clothing Accommodation	10
Sitting Facilities	1
Floors, Passages and Stairs	72
Protection of Young Persons from Dangerous Machinery	8
First Aid	187
Other Matters	178
	<hr/>
	700

ACCIDENTS

During the year 46 accidents were reported none of which was fatal. The occurrence of these was as follows :

Offices	6
Retail Shops	32
Warehouses	2
Catering Establishments	4
Canteens	2

PREVENTION OF DAMAGE BY PESTS ACT, 1949

RODENT CONTROL

		Rats	Mice
Number of complaints received	671	252	419
Number of visits by Rodent Operative	2852		
Number of infestations found	606	219	387

PIGEON CONTROL

Total number of pigeons taken by contractor using trapping methods	240
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STATISTICAL TABLES

Table 1

Vital Statistics 1971

	Totals	Rates per 1, 000 pop.	Rates per cent of live births	Rates per 1, 000 live births	Rates per 1, 000 live belated births	Rates per 1, 000 live total births	England and Wales (Provis)
Live Births	1,979	*12.1					14.8
Males 1017							
Females 962							
Illegitimate 209			11				9
Still Births	27					15	12
Males 8							
Females 19							
Total Live and Still Births	2,006						
Males 1025							
Females 981							
Infant Deaths (under 1)	29			15			17
Males 18							
Females 11							
Legitimate 23							
Illegitimate 6							
Neo-natal deaths (under 4 weeks)	24			12			12
Males 14							
Females 10							
Early neo-natal (under 1 week)	20			10			10
Males 13							
Females 7							
Peri-natal mortality (Combined still births and deaths under 1 week).	47					23	22

* "Adjusted" rate i.e. the crude rate multiplied by the area comparability factor of 1.18.

Population

Estimated Mid Year Population 163,380

Table 2

Death caused by Diseases of the Respiratory System

Year	Tuberculosis		Lung Cancer		Pneumonia		Bronchitis		Asthma		Other Diseases	
	M	F	M	F	M	F	M	F	M	F	M	F
1972	2	—	118	38	49	57	87	24	4	2	10	5
1971	2	—	108	19	43	66	86	23	3	5	10	11
1970	3	2	109	28	53	56	82	34	1	4	18	13
1969	2	2	104	29	48	60	85	30	1	1	11	13
1968	1	4	106	29	45	74	105	28	5	4	6	15

Table 3

Deaths caused by Heart Disease

Year	Chronic Rheumatic Heart Disease		Hypertensive Disease		Ischaemic Disease		Other forms of heart Disease		Total for heart Disease	
	M	F	M	F	M	F	M	F	M	F
1972	8	14	14	21	378	314	47	60	447	409
1971	9	21	14	19	322	280	31	47	376	367
1970	9	17	18	26	390	342	45	63	462	448
1969	6	22	19	26	364	316	34	77	423	441
1968	4	11	24	27	378	316	58	72	464	426

Table 4

DEATHS	TOTALS	RATES PER 1,000 POPULATION	ENGLAND WALES (PROVISIONAL)
Total Males 1,287			
Total Females 1,433			
All Deaths	2,720	11.1	12.1
FROM: -			
Whooping Cough	-	-	-
Diphtheria	-	-	-
Tuberculosis	2	0.01	0.03
Influenza	7	0.04	0.01
Acute Poliomyelitis	-	-	0.00
Pneumonia	106	0.61	0.79
Ischaemic Heart Disease	692	4.23	2.95

Table 5

DEATHS CAUSED BY VIOLENCE.

AGE GROUP	MOTOR VEHICLE ACCIDENTS		ALL OTHER ACCIDENTS		SUICIDE	
	M	F	M	F	M	F
UNDER	-	-	-	-	-	-
1 - 4	-	-	-	1	-	-
5 - 14	3	-	-	-	-	-
15 - 24	2	-	1	-	1	-
25 - 34	-	-	1	-	-	3
35 - 44	-	1	2	-	-	2
45 - 54	-	1	2	-	1	1
55 - 64	2	1	-	2	3	5
65 - 74	2	4	-	2	3	1
75 and over	4	3	8	7	3	1
TOTAL	13	10	14	12	11	13

Table 6**Expenditure****Principal Expenditure - Year ended 31st March, 1972**

			£
N.H.S.A.	Section	21 Health Centres	57,348
		22 Care of Mothers and Young Children	48,160
		23 Midwifery	40,997
		24 Health Visiting	53,345
		25 Home Nursing	81,210
		26 Vaccinations and Immunisation	12,888
		27 Ambulance Service	93,938
		28 Prevention of Illness and After Care	20,302
		Other Health Services	2,109
		Income from these Services	31,609

PUBLIC HEALTH ACTS

Public Health Inspection	59,062
Disinfecting	3,073
Mortuary	2,384
Rodent Control	1,819
Health General	11,395
Income from these Services	807

Table 7
Child Welfare Clinic Attendances

	Southend	Southchurch	Leigh	Westcliff	Shoebury	Thorpedene	Kent Elms	Blenheim	Manners Way	Earls Hall	North Avenue	TOTAL
Number of Sessions	101	100	72	101	51	102	102	26	22	29	52	758
Number attending Born in 1972	147	217	143	259	100	121	281	52	22	57	109	1508
Born in 1971	136	155	139	263	93	114	206	43	17	43	61	1270
Born in 1967-1970	76	69	71	127	38	47	91	9	26	14	20	588
Total Attendances Born in 1972	1037	1633	1058	1784	1145	1226	2353	410	150	581	938	12315
Born in 1971	772	906	796	1313	999	1081	1589	250	126	263	514	8609
Born in 1967-1970	216	275	295	347	458	325	403	33	26	93	66	2537
Number aged 1 to 5 (routine medical inspections)	137	94	178	220	91	106	2	3	2	9	18	860

Table 8
Welfare and Other Foods Distributed

Year	National Dried Milk Packets	Vitamins A, C. & D.	Orange Juice Bottles	Children's Vitamin Drops Bottles
1969	15,287	2,306	44,750	-
1970	11,995	2,362	45,237	-
1971	11,993	1,669	39,440	2,875
1972	11,064	1,293	7,564	4,887

Table 9

Ante-Natal Clinics

	M.H.C.	Leigh	Kent Elms	Westcliff	Thorpedene	Total
Number of Sessions	154	28	51	104	47	384
Number of individual mothers	776	205	330	530	313	2154
Total Attendances	3120	666	1387	1583	620	7376

Table 10

Post-Natal Clinics

	M.H.C.	Leigh	Kent Elms	Westcliff	Thorpedene	Total
Number of Sessions held	97	28	51	104	47	327
Number of individual expectant mothers who attended	249	76	139	130	57	651
Total Attendances	298	81	175	134	61	749

Table 11

Relaxation Classes	...	...	10, 46

Number of sessions	.....	269
Number of expectant mothers who attended	.....	619
Total attendances	.....	3140

Table 12

Ante-Natal Haemoglobin Estimations during 1972 - 1314 tests

Haemoglobin Gms. %	Under 7.5	7.5 - 8.1	8.2 - 8.9	9.0 - 9.6	9.7 - 10.4	10.5 - 11.2	11.3 - 12.0	12.1 - 12.6	12.7 - 13.3	13.4 - 14.1	14.2 - 14.8	14.9 +
% Haemoglobin 14.8 average	Under 51	51-55	56-60	61-65	66-70	71-75	76-80	81-85	86-90	91-95	91-100	100
No of Tests	-	-	2	12	32	130	354	350	272	132	24	6
% of each group	-	-	0.2	0.9	2.4	9.9	26.9	26.6	20.7	10.1	1.8	0.5

Table 13

V.D.R.L. Tests		Rhesus Factor Tests		
No. of tests made	Negative	No. of tests made	Rh. Positive	Rh. Negative
1349	1349	1357	1118	239

Table 14

Deaths Under 1 year by Age Groups

Age Groups	Male	Female	Total
Under 24 hours	9	6	15
24 hours - 1 week	3	2	5
Total under 1 week	12	8	20
1 - 2 weeks	-	-	-
2 - 4 weeks	2	2	4
Total Neo-natal mortality	14	10	24
1 - 3 months	2	1	3
3 - 6 months	1	1	2
6 - 9 months	-	-	-
9 - 12 months	-	-	-
Total Infant Mortality	17	12	29

Table 15

Peri-Natal Mortality

Year	No. of stillbirths	No. of infants dying aged up to and including seven days	Total	Total live and stillbirths	Rate per 1,000 live and stillbirths
1972	27	20	47	2,006	23.6
1971	31	24	55	2,050	26.8
1970	27	27	54	2,130	25.3
1969	26	20	46	2,167	21.0
1968	35	23	58	2,223	26.1
1967	28	30	58	2,302	25.2
1966	37	25	62	2,427	25.6
1965	42	31	73	2,463	29.6
1964	34	31	65	2,485	26.2
1963	38	27	65	2,510	25.9

Table 16

Premature Births 1972

Weight at birth	Premature Live Births												Premature stillbirths	
	Born at home or in a nursing home													
	Born in Hospital				Nursed entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
	Total births	Died within 24 hrs. of birth	Died in 1 day and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hrs. of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hrs. of birth	Died in 1 and under 7 days	Died in 7 and under 28 days		Born in Hospital	Born at home or in nursing home
2 lb. 3 oz. or less	5	3	1	-	-	-	-	-	-	-	-	-	3	-
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	4	2	-	-	-	-	-	-	-	-	-	-	5	-
Over 3 lb. 4 oz up to and including 4 lb 6 oz.	20	5	-	-	-	-	-	-	-	-	-	-	8	-
Over 4 lb. 6 oz.up to and incl. 4 lb. 15 oz.	29	-	1	-	-	-	-	-	-	-	-	-	1	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	62	1	-	-	4	-	-	-	1	-	-	-	2	-
TOTALS	120	11	2	-	4	-	-	-	1	-	-	-	19	-

Table 17

Still Births		Infant Deaths	
Maternal diabetes	1	Prematurity	4
Pre eclamptic toxemia	2	Respiratory failure (associated with prematurity)	9
Placenta insufficienty	1	Neonatal Asphyxia	4
Accidental Haemorrhage	3	Birth injury	1
Congenital abnormality	4	Cot death	2
Anencephaly	5	Congenital abnormalities	5
I.U.D.	11	Respiration failure	4

Table 18**Deaths of Children between ages 1 to 5 years**

Male:	2 years	Congenital Heart Disease
Female:	2 years	Carbon monoxide poisoning
	22 months	Congenital abnormality

Table 19**Deaths of Children between ages 5 to 15 years**

Male:	6 years	Congenital abnormality
	8 years	Road accident
	8 years	Asthma
	9 years	Road accident
	12 years	Road accident
	14 years	Malignant tumour
	14 years	Head injury
Female:	9 years	Congenital heart disease

Table 20
Congenital Malformations

Year	Notifications Received	Notifications Returned to G.R.O.	Rates per 1000 births (live and still)
1967	72	35	15.2
1968	43	26	11.9
1969	37	26	12.0
1970	57	41	19.2
1971	52	33	16.1
1972	33	27	13.0

Table 21
Health Visiting

Cases visited by Health Visitors		No. of cases
1	Total Number of cases	6943
2	Children born in 1972	2245
3	Children born in 1967 - 71	4145
4	Total number of children in lines 2 - 3	6390
5	Persons aged 65 or over	44
6	Number included in line 5 who were visited at the special request of G.P. or Hospital	14
7	Mentally disordered persons	22
8	Number included in line 7 who were visited at the special request of G.P. or Hospital	8
9	Number of tuberculosis households visited	9
10	Number of households visited on account of other infectious diseases	28
11	Other cases	470
12	Number of tuberculosis households visited by T. B. Health visitors	96

Table 22

HOME NURSING SERVICE

Year	Age at time of first visit during the year			
	Over 65		Under 5	
	No.	Visits Paid	No.	Visits Paid
1968	2970	75,565	16	73
1969	2981	76,571	18	178
1970	3086	77,096	17	437
1971	3152	83,132	34	439
1972	3995	90,412	22	392

Table 23

MEDICAL COMFORTS 1972

No. of issues	1193
Total No. of Articles	1521
<hr/>	
Bedpans	372
Plastic Sheets	101
Air Rings	93
Feeding Cups	19
Wheelchairs	198
Cradles	159
Bottles	82
Crutches	96
Commodes	181
Back Rests	122
Walking Aids	82
Walking Sticks	16
<hr/>	
Total	1521
<hr/>	

Table 24

HOME NURSING

Classification of Conditions treated	Number of Patients Visited					
	1967	1968	1969	1970	1971	1972
Accidents	5	6	9	17	4	34
Amputations	3	1	-	4	6	6
Blood Diseases	602	658	501	546	408	462
Bronchitis and Pleurisy	321	386	341	355	340	330
Burns and Scalds	25	19	20	47	20	42
Carbuncles, Boils and Abscesses	40	22	21	23	13	13
Cardiac and Circulatory Conditions	400	494	490	561	417	493
Cerebral Haemorrhage	289	297	266	203	242	288
Dental Conditions	1	-	1	-	1	3
Diabetes Mellitus	70	76	67	71	69	97
Ear, Nose and Throat Conditions	21	18	22	46	28	414
Enema (for treatment)	381	408	326	368	304	295
Enema (for investigation)	486	561	568	522	500	370
Eye Conditions	12	15	10	15	17	51
Fractures	8	16	14	32	40	48
Gangrene	7	2	3	1	2	1
Gastric Conditions	4	6	2	5		2
Gynaecological conditions	26	23	17	20	18	26
Helminth Infections	-	-	-	-	-	-
Infectious Diseases	-	-	-	1	-	-
Influenza	2	7	14	4	1	12
Injections (for unclassified causes)	3	3	23	48	68	887
Maternity	37	5	5	5		1
Miscarriage	6	2	2	3	2	7
Malignant Diseases	286	189	193	214	200	269
Nervous Diseases	45	65	60	37	27	50
Operations	1	-	2	6	5	40
Paralysis (other than strokes)	40	5	2	11	5	10
Pneumonia	41	35	25	24	25	40
Prostatic Conditions	6	8	17	27	19	56
Pyrexia of Unknown Origin	1	-	-	1	1	1
Rheumatic Diseases	243	130	113	116	254	271
Senility	343	291	304	264	246	269
Skin Conditions	43	30	48	44	20	11
Surgical Dressings	364	394	410	592	772	1783
Tuberculosis	50	27	30	29	29	21
Urinary and Renal Conditions	37	221	224	139	92	79
Ulceration of Legs	140	186	206	238	225	328
Not classified	4	2	2	3		44
Total Patients	4,393	4,408	4,358	4,562	4,420	7154
Total Visits	99,758	111,880	107,318	110,679	118,513	134,167
Total of whole-time and equivalent whole-time staff at end of year	27	27.2	30	31	33	32

Table 25

Smallpox Vaccination (under 15 years pf age)

<u>At Council's Clinics:</u>		<u>By Private Practitioners:</u>	
Primary.....	412	Primary.....	86
Re-Vaccination	23	Re-Vaccination	169

Table 26

Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, Measles and Rubella

	Diphtheria	Whooping Cough	Tetanus	Poliomyelitis	Measles	Rubella (German Measles)
Completed Primary Courses .						
1) At Council's Clinics.						
Children under 4	833	824	833	905	571	-
Children 4 - 16	81	-	94	124	50	827
Totals	914	824	927	1029	621	827
2) By Private Practitioners.						
Children under 4	926	889	930	851	522	-
Children 4 - 16	45	27	287	52	92	101
Totals	971	916	1217	903	614	101
Reinforcing Doses						
1) At Council's Clinics.						
Children under 4	3	1	3	3		
Children 4 - 16	1092	-	1096	1105		
Totals	1095	1	1099	1108		
2) By Private Practitioners.						
Children under 4	60	35	65	47		
Children 4 - 14	806	132	1106	805		
Totals	866	167	1171	852		

Table 27

Cholera/Typhoid	524	Tetanus	4
Smallpox (adults only)	672	Yellow Fever	417

Table 28

AMBULANCE SERVICE

	Mileage		Patients Carried		Miles per Patient	
	1972	1971	1972	1971	1972	1971
St. John Ambulance Brigade	123379	118452	17596	16664	7.01	7.11
Corporation Lift Ambulances (2)	25994	25383	15063	15212	1.73	1.67
Hospital Car Service	239689	261769	43652	47533	5.49	5.51
Corporation Car Pool	133659	132006	24445	24056	5.47	5.49
	522721	537610	100756	103465	5.19	5.20
Transport by Rail	35432	40884	905	1006	39.15	40.64

Table 29

Proportionate comparison, 1972, 1971 and 1962

	Miles			Patients		
	1972 %	1971 %	1962 %	1972 %	1971 %	1962 %
St. John Ambulance Brigade	24	22	26	18	16	18
Corporation Lift Ambulances	5	5	7	15	15	18
Hospital Car Service	46	48	61	43	46	60
Corporation Car Pool	25	25	6	24	23	4

Table 30A**Analysis of Journeys - All Services**

Journey	Patients Carried		Increase	Decrease
	1972	1971		
London Hospitals	400	482	—	82
Limb Fitting Centre, Roehampton	164	194	—	30
Limb Fitting Centre, Gillingham	492	521	—	29
Limb Fitting Centre, Cambridge	206	150	56	—
Runwell Hospital	11720	11446	274	—
Rochford General Hospital	20025	19682	343	—
Other Hospitals outside the Borough	123	181	—	58
Convalescent Homes outside the Borough	94	66	28	—
Miscellaneous transfers outside the Borough	114	120	—	6
Southend General Hospital	62958	64713	—	1755
Occupational Therapy Dept., Westcliff	—	1258	—	1258
Westcliff Hospital	200	233	—	33
Local railway stations	924	991	—	67
Miscellaneous local journeys	3336	3428	—	92
	100756	103465	—	2709

Table 30B**Analysis of Journeys - St. John Ambulance Brigade**

Journey	Patients Carried		Increase	Decrease
	1972	1971		
London Hospitals	114	92	22	—
Limb Fitting Centre, Roehampton	10	—	10	—
Limb Fitting Centre, Gillingham	12	—	12	—
Limb Fitting Centre, Cambridge	12	6	6	—
Runwell Hospital	121	145	—	24
Rochford General Hospital	4814	4500	314	—
Other Hospitals outside the Borough	9	20	—	11
Misc. transfers outside the Borough	30	29	1	—
Conv. Homes outside the Borough	3	—	3	—
Southend General Hospital	8844	8186	658	—
Westcliff Hospital	200	232	—	32
Local Railway Stations	152	255	—	103
Miscellaneous local journeys	3275	3199	76	—
	17596	16664	932	

Table 30C

Analysis of Journeys - Hospital Car Service

Journey	Patients Carried		Increase	Decrease
	1972	1971		
London Hospitals	273	382	—	109
Limb Fitting Centre, Roehampton	154	188	—	34
Limb Fitting Centre, Gillingham	434	509	—	75
Limb Fitting Centre, Cambridge	174	144	30	—
Runwell Hospital	547	466	81	—
Rochford General Hospital	2241	2400	—	159
Other Hospitals outside the Borough	104	140	—	36
Convalescent Homes outside the Borough	91	66	25	—
Miscellaneous transfers outside the Borough	70	80	—	10
Southend General Hospital	38791	40984	—	2193
Occupational Therapy Dept., Westcliff	—	1258	—	1258
Westcliff Hospital	—	1	—	1
Local railway stations	720	708	12	—
Miscellaneous local journeys	53	207	—	154
	43652	47533	—	3881

Table 30D

Analysis of Journeys - Corporation Car Pool

Journey	Patients Carried		Increase	Decrease
	1972	1971		
London Hospitals	13	6	7	—
Limb Fitting Centre, Roehampton	—	6	—	6
Runwell Hospital	11052	10835	217	—
Rochford General Hospital	12966	12778	188	—
Other Hospitals outside the Borough	9	14	—	5
Miscellaneous transfers outside the Borough	10	11	—	1
Southend General Hospital	364	376	—	12
Local railway stations	23	8	15	—
Miscellaneous local journeys	8	22	—	14
	24445	24056	389	

Table 30E

Analysis of Journeys - Corporation Lift Ambulances

Journey	Patients Carried		Increase	Decrease
	1972	1971		
Chadwell Heath Hospital	—	2	—	2
Limb Fitting Centre, Gillingham	46	12	34	—
Limb Fitting Centre, Cambridge	20	—	20	—
Nuffield Orth. Centre, Headington	1	3	—	2
Stoke Mandeville Hospital, Aylesbury	—	4	—	4
Misc. transfers outside the Borough	4	—	4	—
Rochford General Hospital	4	4	—	—
Southend General Hospital	14959	15167		208
Local Railway Station	29	20	9	—
	15063	15212		149

Table 30F
Analysis of Rail Journeys

	Patients Carried		Increase	Decrease
	1972	1971		
<u>London Hospitals</u>				
Brompton S.W.3	18	6	12	—
Charing Cross, W.C.2	8	20	—	12
Guys, S.E.1	22	19	3	—
Hammersmith, W.12	41	78	—	37
Hospital for Sick Children, W.C.1	75	57	18	—
Limb Fitting Centre, Roehampton, S.W.15	52	77	—	25
London, E.1	77	101	—	24
London Chest, E.2	51	39	12	—
Middlesex, W.1	28	34	—	6
Moorfields, E.C.1	102	108	—	6
Moorfields, W.C.1	55	54	1	—
National, W.C.1	18	10	8	—
Royal National Orthopaedic, W.1	90	95	—	5
St. Bartholomews, E.C.1	129	117	12	—
St. Marys, W.2	—	14	—	14
St. Marys, W.9	10	—	10	—
West End, W.1	6	10	—	4
Westminster, S.W.1	12	21	—	9
Westminster Childrens, S.W.1	12	—	12	—
 Other London Hospitals	 50	 78		 28
 Other Hospitals				
Heatherwood, Ascot	2	6	—	4
St. Johns, Droitwich	1	—	1	—
Western General, Edinburgh	2	4	—	2
Wexham Park, Slough	—	2	—	2
 Miscellaneous transfers and discharges to addresses outside the County Borough	 44	 56	 —	 12
	905	1006		101

Table 31

Tuberculin Skin Testing and B.C.G. Vaccination

	Acceptance Rate %	Percentage Previously Vaccinated	Natural Positive Rate %	Conversion Rate %
1st year	92.6 (92.0)	8.67 (6.79)	0.25 (0.99)	- -
2nd year	93.7 (94.6)	7.49 (8.68)	1.03 (1.45)	0.19 (0.29)
3rd year	95.3 (94.9)	7.84 (7.88)	1.78 (1.53)	0.36 (0.25)

The Figures in brackets are those for the previous year.

Table 32

Heaf Reactions of Unvaccinated Secondary School Pupils

	Grade of Reaction to Heaf Test				Total
	1	2	3	4	
1st year	1 (12)	- (5)	1 (-)	- (-)	2 (17)
2nd year	5 (8)	- (-)	- (-)	- (-)	5 (6)
3rd year	8 (6)	- (1)	1 (-)	- (-)	9 (7)
Total	14 (24)	- (6)	2 (-)	- (-)	16 (30)

The Figures in brackets are those for the previous year.

Table 33

Summary - All Schools

Total No.	First Year Pupils	Second Year Pupils	Third Year Pupils	Private Schools	Total
Invited	2386	2376	2496	43	7301
Consented	2211	2227	2379	43	6860
Tested	1904	1920	2205	43	6072
Negative	1755	1784	2033	41	5613
Natural Positive	9	5	9	1	24
Prior vaccination	2	-	95	1	98
Converters	-	1	6	-	7
B.C.G. given	-	-	1915	40	1955

Table 34

**TOTAL NUMBER OF INFECTIOUS DISEASES
NOTIFIED IN 1972**

Disease	March	June	September	December	Total
Measles	20	58	144	48	270
Dysentery	—	—	1	—	1
Scarlet Fever	30	12	2	17	61
Acute Meningitis	—	1	—	1	2
Ophthalmia Neo-natorum	1	2	—	—	3
Malaria	—	—	1	—	1
Paratyphoid Fever	—	—	—	—	—
Food Poisoning	2	—	2	1	5
Infective Jaundice	4	17	7	14	42
Resp. Tuberculosis	5	2	8	5	20
Meninges & CNS	—	—	—	—	—
T.B. 'Other'	1	—	—	—	1
Whooping Cough	2	—	2	—	4
	65	92	167	86	410

Table 35

Tuberculosis Notifications and Deaths

Age Group	Males								Females							
	Respiratory				Non-Respiratory				Respiratory				Non-Respiratory			
	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths	Primary Notifications	Inward Transfers	Total	Deaths
0	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
1	.	.	.	.	.	.	.	.	1	.	1	.	.	.	.	.
5	2	.	2	.	.	.	.	.	1	.	1	.	.	.	.	.
15	1	.	1	.	.	.	.	.	1	.	1	.	.	.	.	.
25	.	1	1	.	1	.	1	.	2	1	3	.	.	.	.	.
35	1	.	1	.	.	.	.	.	.	.	.	.	.	.	.	.
45	3	1	4	.	.	.	.	.	.	2	2	.	.	.	.	.
55	3	.	3	.	.	.	.	.	.	.	.	.	.	.	.	.
65	4 *	.	4 *	3	.	.	.	.	.	.	.	.	.	.	.	.
75	.	.	.	.	.	.	.	.	2 *	.	2 *	.	.	.	.	1
Totals	14 *	2	16 *	3	1	.	1	.	7 *	3	10 *	.	.	.	.	1

* Includes 1 posthumous notification

Table 36

Respiratory Tuberculosis

Primary Notifications Classified According to Age Groups

Age Groups	1965		1966		1967		1968		1969		1970		1971		1972	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
0	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
1	-	-	1	1	-	-	-	1	-	-	-	2	1	-	-	1
5	1	.	2	2	2	2	2	2	3	-	5	4	2	1	2	1
15	3	3	1	2	2	1	-	1	2	3	1	2	2	2	1	1
25	1	2	3	5	5	-	-	1	2	1	2	3	-	2	-	2
35	2	6	2	2	-	2	1	1	4	2	1	1	3	-	1	-
45	9	1	1	3	3	-	4	-	1	1	2	5	4	-	3	-
55	6	1	-	4	4	1	1	-	1	-	4	-	1	1	3	-
65	7	1	1	3	3	1	2	3	5	1	1	1	3	1	4	-
75	2	2	3	1	1	-	3	4	2	-	1	1	-	-	-	2
Totals	31	16	25	14	23	7	13	13	20	8	17	19	16	7	14	7
	47		39		30		26		28		36		23		21	

Table 37

Work of the Chest Clinic

	Respiratory				Non-Respiratory				Totals				Grand Totals
	Adults		Children		Adults		Children		Adults		Children		
	M	F	M	F	M	F	M	F	M	F	M	F	
No. of notified cases on clinic register at 1st January.	353	244	8	18	19	53	5	1	372	297	13	19	701
Transfers from clinics outside area during year.	2	3	—	—	—	—	—	—	2	3	—	—	5
Children transferred to adult register	2	1	—	—	—	—	—	—	2	1	—	—	3
No. of new cases diagnosed during year :T.B.negative	1	1	2	1	—	—	—	—	1	1	2	1	5
T.B.positive	12	4	—	1	1	—	—	—	13	4	—	1	18
Totals	370	253	10	20	20	53	5	1	390	306	15	21	732
No. of cases written off clinic register during the year:													
Recovered	41	32	—	—	5	2	—	—	46	34	—	—	80
Died (all causes)	17	7	—	—	—	—	—	—	17	7	—	—	24
Removed to other clinic areas	3	1	1	1	—	1	—	—	3	2	1	1	7
Children transferred to adult register	—	—	2	1	—	—	—	—	—	—	2	1	3
Other reasons	1	—	—	—	—	—	—	—	1	—	—	—	1
Totals	62	40	3	2	5	3	—	—	67	43	3	2	115
No. of notified cases on clinic Register at 31st December	308	213	7	18	15	50	5	1	323	263	12	19	617
No. of above known to have had positive sputum during year	—	—	—	—	—	—	—	—	15	5	—	1	21
No. of persons (excluding transfers) first examined during the year	—	—	—	—	—	—	—	—	863	870	78	58	1869
No. of those who attended as contacts and who were diagnosed as: Tuberculous	—	—	—	—	—	—	—	—	1	—	2	2	5
Not tuberculous	—	—	—	—	—	—	—	—	69	150	114	145	478
Not determined as at 31st December	—	—	—	—	—	—	—	—	—	—	—	—	—

Table 38

Cases on Register at 31st December

Year	Respiratory				Non-Respiratory				Totals				Grand Totals
	Adults		Children		Adults		Children		Adults		Children		
	M	F	M	F	M	F	M	F	M	F	M	F	
1972	308	213	7	18	15	50	5	1	323	263	12	19	617
1971	353	244	8	18	19	53	5	1	372	297	13	19	701
1970	354	240	8	19	16	53	5	1	370	298	13	20	696
1969	355	229	6	19	15	52	5	1	370	281	11	20	682
1968	367	246	8	18	14	50	5	1	381	296	13	19	709
1967	386	253	8	21	13	52	6	1	399	305	14	22	740
1966	400	280	5	20	9	54	5	—	409	334	10	21	774
1965	403	278	5	17	7	51	5	—	410	329	10	17	776
1964	396	283	6	21	6	51	6	—	402	334	12	21	769
1963	397	283	6	23	5	44	6	—	402	327	12	23	764

Table 39

Customs Movements of Aircraft and Passengers

Month	Movements		Passengers	
	In	Out	In	Out
January	463	453	6184	6521
February	477	477	6318	6034
March	514	510	9484	11366
April	689	681	17338	16172
May	737	722	15521	18347
June	709	682	15633	14480
July	817	802	18490	20275
August	930	914	21894	19869
September	739	726	18587	16830
October	602	601	13276	11940
November	428	410	7241	6702
December	393	385	8402	8900
	7498	7363	158368	157436

Table 40.**Medical Reports**

Department	Statement of Health	Medical Examinations	Sick Pay
Airport	12	8	4
Architects	13	1	—
Cemeteries	2	—	—
Education. TTC	—	209	—
Education	590	52	13
Engineers	105	22	28
Fire	27	18	1
Health	29	5	—
Housing	5	3	—
Justices Clerks	3	—	—
Libraries	19	1	1
Police	—	—	—
Public Amenities	209	22	20
Social Services	307	36	—
Town Clerks	16	2	—
Transport	136	65	12
Treasurers	30	1	1
Weights and Measures	3	—	—
TOTALS	1,506	445	80

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**ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1972**

**PRIMARY AND SPECIAL EDUCATION SUB-COMMITTEE
OF THE EDUCATION COMMITTEE**

Chairman

Alderman L. H. Curtois

Vice-Chairman

Mr. F. C. Gardner

Ex-Officio

Chairman of Education Committee - Alderman A. V. Mussett
Vice-Chairman of Education Committee - Councillor E. W. J. Lockhart

Councillor L. W. F. Bennett
Councillor Mrs. S. V. D'Ath
Councillor A. R. Fuller
Councillor G. R. M. Littler, D. P. Arch.
Councillor Mrs. J. Sargent
Councillor L. A. Woodward
Rev. Canon F. Dobson
Rev. Canon S. T. Erskine
Mr. J. F. Dixon
Mr. H. F. McCarthy

STAFF OF THE SCHOOL HEALTH SERVICE

A. WHOLE-TIME OFFICERS:

Principal School Medical Officer:

G. V. Griffin, M.B., B.S., D.P.H., M.F.C.M.

Deputy Principal School Medical Officer:

M. R. Mellor, M.B., Ch.B., L.R.C.P., D.P.H., M.F.C.M.

Senior Medical Officer and Senior School Medical Officer:

I. B. Barrie, M.B., Ch.B., D.Obst.R.C.O.G., D.P.H., M.F.C.M.,

Senior Medical Officer:

M. S. M. Adams, M.B., B.S., M.R.C.S., L.R.C.P.
appointed 1.5.72

School Medical Officers:

J. Greenhalgh, M.B., B.S., M.R.C.S., L.R.C.P., D.A.
E. G. O'Sullivan, L.R.C.P., S.I., L.M.

Chief Dental Officer:

J. M. Stratford, L.D.S.

Area Nursing Officer (Formerly Superintendent Health Visitor):

Mrs. M. Gower, (formerly Townsend) S.R.N., S.C.M., H.V.Cert.
appointed 1.1.72

Health Visitors and School Nurses:

14 whole-time. 4 part-time

5 students under training

School Clinic Nurse:

Mrs. J. E. Arthur, S.R.N.

1 School Clinic Attendant

School Nurses: 3

Senior Administrative Assistant:

Miss A. M. Roberts

Administrative Assistant:

Mrs. G. Knight

Clerks: 8

Dental Attendant: 1 **Dental Clerk:** 1

Secretary - Child Guidance Clinic:

Mrs. C. Brown

B. PART-TIME OFFICERS:

Medical Staff: 3

Psychiatrist:

H. Bevan-Jones, M.R.C.S., L.R.C.P., D.P.M.

Social Worker (Child Guidance Clinic):

Mrs. E. J. Loveday

Senior Educational Psychologists:

J. T. Acklaw, B.Sc.
appointed 21.2.72

Assistant Educational Psychologists:

Miss I. E. Clements, B.A.

Mrs. V. J. Macpherson, B. A. resigned 23.4.72

C. J. T. Rogers, M.A. appointed 1.9.72

Dental Officers:

D. F. Hayes, B.D.S.

Speech Therapist:

Miss J. Sibley, L.C.S.T.

Dental Attendant: 1

Physiotherapist at Kingsdown School: 1

Physiotherapy Assistant: 1

Physiotherapist at Lancaster School: 1

ANNUAL REPORT 1972

PRIMARY AND SPECIAL EDUCATION SUB-COMMITTEE OF THE EDUCATION COMMITTEE

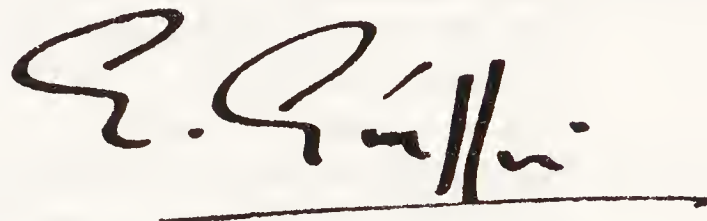
I have pleasure in presenting, as Principal School Medical Officer, my annual report for 1972.

This year has seen the programme for selective medical inspection of school pupils in full operation, and it would seem that it is a most satisfactory way of ensuring that those children for whom the Committee is responsible who require the attention of the medical staff are able to be discerned and helped as much as possible, while the majority of perfectly normal children who present no problem are not needlessly examined.

The increase in the number of plantar warts or verrucae reported in last year's Annual Report has continued and special clinics have been set up to deal with children so affected. At the end of the year the new cases coming forward were at a very much earlier stage and therefore more easily dealt with, though the total number is still unacceptably high.

The passage of the National Health Service Bill foreshadows changes in the reorganisation of the School Health Service and at this point of time it is unclear whether the Education or Health Authority will have the ultimate responsibility in providing health services to school children.

May I take this opportunity of thanking the Education Committee, the Chief Education Officer and his staff for their continued interest, support and active co-operation, and Dr. Barrie and the School Health Service staff for their major contribution to the work of the School Health Service.

A handwritten signature in dark ink, appearing to read 'E. G. Hall', written over a horizontal line.

Principal School Medical Officer

STAFF

Dr. Adams was appointed to the post of Senior Medical Officer in May. There were no other changes in the wholetime medical and dental staff.

Mrs. M. Gower was appointed to the post now designated Area Nursing Officer, replacing Miss E. Roberts, Superintendent Health Visitor, who retired.

MEDICAL AND DENTAL INSPECTIONS

Medical Inspections of Young Children

Children being admitted to the nursery classes in schools have a medical examination before they start attending school.

The general development of children who are below compulsory school entrance age is supervised by the health visitors. Any of these children whose development causes concern is brought forward to the notice of the medical staff who keep his progress under review. The aim is that a child with a handicapping condition, or a potentially handicapping condition, is assessed and his problem dealt with as fully as possible before school entry. This involves ensuring that there is not only close liaison with members of the various branches of medicine, but also with the relevant staff of various departments of the local authority.

Special help is available for some children under the age of five years at Lancaster School, at the Partially Hearing Unit, Prince Avenue Infant School, and at the Observation Unit sited at present at St. Christopher School. Admission to classes at these schools is made on recommendation of the Principal School Medical Officer to the Chief Education Officer. The children's Day Centre at Southend General Hospital has a nursery class held by a teacher employed by the Local Education Authority. Most children in this class are physically handicapped and are receiving physiotherapy, occupational therapy and speech therapy from hospital staff and are under the supervision of the Consultant Paediatrician. Case conferences are held regularly and attended by the hospital staff and the staff of the School Health Service, the School Psychological Service and the Social Services Department of the Local Authority. When the child reaches school age the arrangements necessary to ensure admission to the most appropriate school are initiated by the School Medical Officer. In other circumstances the admission of a child to nursery classes in the town may be recommended, on medical or medical-social grounds, or a placement in one of the private playgroups or with daily minders, may be arranged.

INFANT SCHOOLS

Medical examination and Testing of Vision and Hearing

All children are medically examined and their vision and hearing tested in their first year at school. Parents are advised when this is to happen and invited to attend. The school nurse visits the school prior to the medical examination to carry out the hearing and vision tests.

JUNIOR SCHOOLS

Vision and hearing tests carried out by the school nurse are repeated during the child's first year in the junior school and again during his final year there. Colour vision testing may be done at this stage.

All children in their last year at junior school are due for medical examination under the provisions of Section 48 of the Education Act 1944, but a selective medical examination scheme provides that only children in certain categories are examined. The selection is made by the School Medical Officer (details concerning this selection are described in the Annual Report of 1971).

SECONDARY SCHOOLS

Testing of vision is carried out during the pupils' second and third years at school. It is hoped eventually to be able to repeat this during the last year of compulsory education.

The selective medical examination scheme (as for junior schools) was carried out this year in the third year. It is proposed to defer this until the fourth year following the raising of the school leaving age.

Periodic Inspections

The number of periodic inspections was 2,672 compared with 2,655 in 1971.

Medical Supervision of Handicapped Pupils

The regular visits by school medical staff to the Special Schools were maintained.

Consultations at any stage of a child's school life can be arranged on request either directly with the School Health Department or through the Education Department, or the child's own school.

School Dental Service

I am grateful to Mr. Stratford, Chief Dental Officer, for the following report on the School Dental Service.

"During the latter part of the year we were able to start and hold a dental treatment session at the surgery at Leigh.

The demand for treatment from the Local Authority Service has been somewhat similar to last year: 14,998 pupils were inspected at school and the clinics and 8,683 pupils required treatment and were offered it, but the acceptance rate was similar to last year, 16.5%. The percentage of pupils requiring treatment was 58% compared to 57% last year.

Dental School Inspections were carried out in 46 schools.

Treatment carried out is summarised as follows :-

1972		1971	
5 - 9 age group ratio of teeth conserved to extracted		5 - 9 age group ratio of teeth conserved to extracted	
Permanent dentition	16.1	Permanent dentition	13.1
Deciduous dentition	1.1	Deciduous dentition	18.1
10-14 age group ratio of teeth conserved to extracted		10-14 age group ratio of teeth conserved to extracted	
Permanent dentition	9.1	Permanent dentition	6.1
Deciduous dentition	1.2	Deciduous dentition	6.1
15 years and over age group		15 years and over age group	
Permanent dentition	4.1	Permanent dentition	5.1

Fortunately the need for prosthetic treatment still remains low.

The recall system started last year is working well and is encouraging pupils who use our dental service to maintain healthy mouths. The children seem to be pleased that the recall system has put an end to long treatment sessions and this is to everyones benefit. Regular dental check-ups seem to be worthwhile, as a visit to the dentist does not necessarily mean treatment. In this type of atmosphere, helpful hints on oral hygiene are taken more seriously by children."

PROVISION OF MILK AND MEALS

Milk in Schools

It is now possible to supply one-third pint bottles of milk free of charge to pupils in the following categories only.

- Every pupil in every Special school.
- Every pupil in every primary school until the end of the Summer term ending next after the date on which he attains the age of seven.
- Every other pupil in a primary school and every junior pupil in an all age school or middle school in respect of whom there is for the time being in force a certificate given by the Medical Officer of the Authority stating that his health requires that he should be provided with milk at school.

The Local Education Authorities may make provision for the sale of milk in primary schools to children who are over the age of seven. The sale of one-third pint bottles of milk to pupils no longer eligible for free milk continued throughout the year at a charge of 2½p. per bottle.

Arrangements were made so that any child considered in need of free milk should be referred to the Principal School Medical Officer; the school children were examined by one of the medical staff and certificates were issued by the Principal School Medical Officer for generally a minimum of one school year. Twenty-three

children were referred to the Principal School Medical Officer and free milk was authorised for them all.

Total number of one-third pint milk bottles supplied :-

Maintained Schools	1,118,363
Independent Schools	87,033
Total	<u>1,205,396</u>

School Meals Service

Number of meals supplied	2,860,328
Percentage of children enrolled taking meals	Primary 59%
	Secondary 45%

On a selected day 17% of the meals served to pupils in maintained schools were free meals.

Number of Kitchens

There are 49 kitchens in use. The following schools are the only maintained schools which continue to receive container meals from kitchens not on their own premises:-

St. Helens R. C. Junior Mixed and Infant School

Hamlet Court Infant School

Lancaster School

Meals were supplied to two independent schools.

Food Poisoning

There were no outbreaks of food poisoning associated with the school meals service.

ARRANGEMENTS FOR TREATMENT

General

A. School Clinics

Municipal Health Centre, Warrior Square, Southend-on-Sea.

Afternoons at 2.15 p.m. Monday to Friday throughout the year.

B. Minor Ailment Treatment Centre

Municipal Health Centre, Warrior Square, Southend-on-Sea.

Mornings from 9.0 a.m. Monday to Friday
(Treatment by School Clinic Nurse)

C. Dental Clinic

Municipal Health Centre, Warrior Square, Southend-on-Sea.

One Surgery open for 10 sessions weekly
until 4th October 1972, thereafter for
9 sessions weekly.

A second Surgery open for 4 sessions weekly.

No. 70 Burnham Road, Leigh-on-Sea.

One session weekly from 5th October, 1972.

D. Eye Clinic

Regional Hospital Board Clinic held on Local Authority premises.

Municipal Health Centre, Warrior Square, Southend-on-Sea.

Thursday morning at 9.30 a.m.

E. Child Guidance Clinic

Psychiatrist provided by Regional Hospital Board.

Premises and ancillary staff provided by Local Authority.

Municipal Health Centre, Warrior Square, Southend-on-Sea.

The Clinic works on an appointments system. The Psychiatrist
attends on 6 sessions a week on Monday, Tuesday and Friday
throughout the year.

F. Speech Therapy Clinic

Municipal Health Centre, Warrior Square, Southend-on-Sea.

The Clinic works on an appointments system. There is an
establishment for two Speech Therapists working at the Central
Clinic and at the clinic premises at Leigh and Thorpedene as
required. They are also engaged on work at the schools. Visits
are paid to ordinary schools and regular visits to special schools.

The Central Clinic at the Municipal Health Centre, Warrior Square, continues to provide a full range of services comprising inspection clinics, minor ailment treatment centre, dental clinic and special clinics for child guidance, speech therapy and ophthalmic services. These premises are shared by the maternity and child welfare and immunisation services of the Health Committee, as are the peripheral clinics at Eastwood, Leigh, Westcliff and Thorpedene.

Malnutrition

No child examined at medical inspections was considered to be in an unsatisfactory physical condition. Teachers are encouraged to refer to the school health service any child whose condition causes them concern.

School Clinics

There were 1,002 attendances at school clinics compared with 1,328 in 1971. These figures include both chance attendances at the medical officers' clinics and special examinations undertaken by appointment. With the appointment system becoming well established, more time is available to be spent on the child and his problem. The clinics at Leigh, Kent Elms and Thorpedene remained closed to casual attenders but when it was found that there were sufficient children requiring examination in these areas, special clinics were arranged and the pupils invited to attend there by appointment. School clinic arrangements at Warrior Square were maintained.

Minor Ailments

Fourteen attendances for treatment of minor ailments were dealt with by the school clinic nurse.

Plantar Warts

It was found necessary to continue special clinics dealing with pupils suffering from plantar warts; 9,992 treatments were carried out compared with 3,272 in the previous year.

Uncleanliness and Verminous Conditions

Forty-four pupils were found to be infested in the course of 12,702 inspections. The school nurses were responsible for the supervision of these conditions. Children are excluded from school until infestation is cleared. The headteacher requires a clearance certificate before allowing the pupil to re-enter the school, the certificate being obtained from either the School Health Service or from the General Practitioner.

Convalescent Treatment

No child was recommended for convalescent treatment under the Education Committee's scheme. Convalescence which is required as a continuation of hospital treatment is provided by the hospital service under the National Health Service.

Eye Diseases and Defective Vision

Children with squints are referred direct to a consultant at the hospital. Children found to have refractive errors attend the Eye Clinic at the Municipal Health Centre or a private optician. Variation in visual acuity may appear at any age during school life and as the onset is gradual the child may not realise that his visual acuity is deteriorating. The screening services are bringing forward to our attention many of these children, and the school nurses on occasion have a difficult task in persuading the parents that action should be taken in the interest of their child's vision. A school medical officer is responsible for the surveillance of the school

progress of children suffering from severe defects of vision and if it becomes necessary will indicate the need for the provision of special education.

Orthoptic Clinic

Since 1968, children requiring treatment have attended the General Hospital.

Diseases of the Ear, Nose and Throat

Screening audiometric tests of hearing are carried out by the school nurses and when indicated the children are referred to the school medical officer for further assessment. Special clinics where children with hearing problems are seen by doctors with experience in E.N.T. conditions are held at Warrior Square. Some general practitioners are now referring children to the School Health Service for assessment of hearing. In many cases the condition does not warrant surgical intervention, nor will medical treatment improve the condition. The children with these conditions are reported to the Headteachers by the medical staff and advice on their management in school is given. It is hoped that in the future a peripatetic teacher of the deaf will be able to supervise these pupils' progress in school. The aim is to prevent these children becoming educationally retarded because of their difficulty in hearing in the school situation.

At periodic, selective and special inspections by the school medical officers, twenty-one children were reported to require treatment for conditions of the nose and throat; 118 pupils of all ages known to have received operative treatment for adenoids and chronic tonsillitis were reported to the local authority from the hospitals this year, compared with 52 in 1971.

An attempt is made to keep a complete record of the number of children wearing hearing aids in school. A school medical officer and the teacher in charge of the partially hearing unit are informed of these cases with a view to advising the school staff and the pupil concerned on the best use of the equipment.

Orthopaedic and Postural Defects

Advice and in-patient treatment are provided locally at Southend General Hospital. It was reported that 126 children attended the orthopaedic out-patient department. Children with defects are kept in ordinary school, if possible, but if this is considered detrimental to their education or health they can be transferred to Kingsdown School for physically handicapped and delicate children, or if need be to residential special schools.

Handicapped and Delicate Pupils

School medical officers attend the hospital outpatient department where some of these handicapped children are under observation. The consultant paediatrician and a physiotherapist employed by the hospital visit Kingsdown School. This arrangement helps to provide continuity of care and treatment between the hospital and school.

Speech Therapy

During the year one speech therapist was in post. Despite the fact that she was working on her own, she was able to maintain her visits to special schools: 257 children were treated and 1,463 attendances recorded at clinics.

Diagnosis	Boys	Girls	Total
Defective articulation	99	44	143
Retarded speech and language development	46	23	69
Non-fluency	18	5	23
Cleft palate	3	4	7
Defective nasality	5	—	5
Communication disorder	6	4	10
Hearing loss	3	3	6
Dysarthric/dyspraxic element	6	1	7
Dysphonia	2	—	2
	188	84	272

Child Guidance

The work of the Child Guidance Clinic continued in its pattern of individual and group interviews by the consultant psychiatrist of the children, their parents and those involved with the children.

Medical undergraduates and trainee educational psychologists visited the clinic and Priory School as part of their training.

Staff Changes

Mr. J. T. Acklaw, B.Sc., was appointed as Senior Educational Psychologist on 2nd December, 1972. Mrs. V. J. MacPherson, B.A., Assistant Educational Psychologist resigned on 23rd April, 1972 and was succeeded by Mr. C. J. T. Rogers, M.A., on 1st September, 1972.

Part-time Psychiatrist

Interviews with children	566
Interviews with parents	697
Interviews with Headteachers,)	
Probation Officers and other agencies)	269

The following tables show the source of referral in the 93 cases referred to the clinic during the year and the age range of the children concerned :-

Sources of referral :-

	Boys	Girls	Total
Parents	6	4	10
Principal School Medical Officer	9	3	12
Probation Officers/Juvenile Court	1	—	1
General Practitioners	24	13	37
Medical Officers (S.G.H.)	1	7	8
Educational Psychologists	8	4	12
Head Teachers	3	3	6
Other Agencies	5	2	7
	57	36	93

Age Range	Boys	Girls	Total
Under 5 years	9	4	13
5 - 7 years	11	6	17
8 - 10 years	19	9	28
11 - 13 years	15	9	24
14 - 16 years	3	8	11
	57	36	93

A full report of the work of the Educational Psychologists will be found in the annual report of the Chief Education Officer.

WORK OF THE SCHOOL NURSES

Health Visitors have a joint appointment of Health Visitor/School Nurse. The work of the Health Visitor in the school takes the form mainly of health education and liaison work between home and school, or School Health Department.

School Nurses without the Health Visitor's qualifications are employed so that the other services to the schools are maintained. They attend the sessions for medical inspection of all children entering infant school for the first time, and of the pupils selected for medical inspection in the junior and secondary schools. They carry out screening tests of visions and hearing on pupils at the ages of 5 and 7 years, as well as vision tests on pupils at the ages of 10, 12 and 13 years, including colour vision of both boys and girls. Cleanliness inspections are carried out when indicated.

School Nurses Follow up Visits to the Home

	No. of children visited	No. of visits made
Encourage attendance for special examination	154	218
Hearing difficulties	90	105
Squint or defective vision	208	226
Verminous conditions	299	243
Infectious diseases	34	23
Contagious skin diseases (Impetigo, Ringworm)	97	67
Poor physical condition or dirty	44	49
Vaccination or immunisation	4	4
Parent counselling	83	68
Other conditions	99	116
Total	1112	1119

HEALTH EDUCATION

The staff of the School Health Service have given single talks and courses of lectures and demonstrations on a variety of subjects in the schools. Topics have included Personal Relationships, Social and Mental Health and Child Care. There have been more requests for advice, information, literature and visual aids on Health Education from the schools. Should the present trend of interest in Health Education continue, then the need grows to have available more time from our staff suitably trained to deal with the situation.

Health Education was carried out by our staff in the following schools :-

Belfairs High School fir Girls	53	Sessions
Eastwood Hlgh School for Girls	6	"
Southend High School for Girls	25	"
College of Technology	1	"
Earls Hall Junior School	2	"
Leigh Junior School	2	"
St. Helens Junior School	1	"
Temple Sutton Junior School	3	"
Fairways Junior School	1	"
Westborough High School for Girls	3	sessions weekly for two terms

Representatives of the School Health Service Staff attended liaison sessions with schools and Technical Colleges (25). Lectures were given at Further Education courses. Staff attended in their official capacity at the Citizenship Exhibition (April) and at Eastwood High School for Boys 'Learning to Earning' Conference. The Smoking Campaign was carried out in conjunction with the Health Education Council at the following schools :-

Belfairs High School for Girls	Westcliff High School for Boys
Belfairs High School for Boys	St. Thomas More Hlgh School
Eastwood High School for Girls	Cecil Jones High School
Eastwood High School for Boys	Southchurch Hlgh School for Boys
Southend High School for Girls	Dowsett Hlgh School for Girls

Much time was spent on informing on the dangers of smoking, considered one of the major hazards of our time. The amount of time that was spent advising on measures to be taken to combat the verruca outbreak and advising on preventive measures, indicates once more that the established principles of public health and hygiene still require to be taught.

HANDICAPPED PUPILS

Special Day Schools

For educationally sub-normal pupils	3
" physically handicapped and delicate	1
" maladjusted	1
Partially hearing unit	1
Observation unit	1

Before a recommendation is made by the Principal School Medical Officer to the Chief Education Officer to transfer a pupil from an ordinary school to a special school, each case is assessed as fully as possible. In the special schools there are many pupils who suffer from more than one handicap, and every effort is taken to ensure that the staff at the school are aware of all the problems the child has to cope with, so that he can benefit from the special education available to him.

HOSPITAL AND HOME TUITION

Mrs. Jean Berg and her assistant provide hospital tuition. They visit the medical and surgical wards at Southend General Hospital. The co-operation of the head teachers of schools, the nursing staff and the occupational therapists is an essential part of this service.

A teacher is not provided at Rochford Hospital but any child who is admitted for other than short-term care is catered for on an individual basis by a school via the Education Department.

The nursery class, in the charge of the teacher seconded to the hospital service, continues to function at the Children's Day Centre at Southend General Hospital.

		Children	Teaching Sessions
Wards	Borough	359	1,114
	County	354	1,124
		<hr/> 713 <hr/>	<hr/> 2,239 <hr/>
Children's Day Centre	Borough	15	734
	County	21	2,484
		<hr/> 36 <hr/>	<hr/> 3,218 <hr/>

It has been the policy to recommend to the Education Department admission to a school in the case of every child no matter how handicapped, although this has involved extra work and has presented new problems. In May the Chief Education Officer reported that during the last two years there had been no pupils requiring the services of a teacher for home tuition. It was later resolved that the post be discontinued.

UNIT FOR PARTIALLY HEARING CHILDREN

This unit continues to cater for children of nursery school and infant school age. As soon as a child is diagnosed as having a severe hearing problem he is referred with the parents to the teacher in charge of the unit for support and training in the management of the handicap. The child's admission to the unit is arranged as soon as it is possible. Integration with the pupils in the main school is encouraged. At present, if a child cannot cope in the ordinary school from the age of about seven years, a residential place is sought for that child. Some children in ordinary schools who have hearing problems are visited by the teacher from the partially hearing unit, but there are others in the ordinary schools who would benefit from the attention of a peripatetic teacher of the deaf. At present, when a child is found to be suffering from a conductive hearing loss which may last for some time, he is brought to the attention of the headteacher by letter from the Principal School Medical Officer. General advice is given in the letter and a request is made that if any problems are noted then the child should be referred to the School Health Service immediately for further action on his case.

St. Christopher and St. Nicholas Schools

These two schools provide day special education for educationally sub-normal pupils. It was possible to maintain regular visits to these schools by the School Medical Officers this year. A few places were again available for pupils who, despite being at the lower end of normal intelligence, are so educationally retarded that they require remedial education at present not available in ordinary schools. The progress of the pupils is reviewed carefully so that their transfer to ordinary education is arranged as soon as possible. In November 1972 St. Christopher School was destroyed by fire.

Lancaster School

As soon as the staff of the Health Department become aware that a child is likely to require to attend this school, the parents are put in touch with the Head Teacher of the school. When the parent agrees, the informal admission on a part-time basis is made while the child is still of nursery school age. School Medical Officers maintain close supervision of the children's general development. A Consultant Physician visits to see the children and to advise the parents, the school staff and the medical staff on further management. The staff of the Social Services Department is closely associated with the care given to these children and the support given to the families. Physiotherapy and speech therapy are provided when available. The Educational Psychologists now visit this school regularly.

Kingsdown School

This is a school for physically handicapped and delicate children. When places are available they may be taken up by children living in Essex. Physiotherapy is provided by a physiotherapist and her assistant who are employed by the Hospital Management Committee. A Consultant Paediatrician from Southend General Hospital acts as paediatric adviser to the school. The School Medical Officer for this school is also a clinical assistant at the paediatric out-patient department. This close co-operation between the hospital and school improves the continuity of the care of the pupils at the school.

Many of the pupils in this school are multiple-handicapped, and the help the Educational Psychologists provide means that the educational, physical and emotional needs of the pupils can now be considered together, and a comprehensive programme of help can be provided for each child according to his needs.

The Southend and District Riding Club for the Disabled have continued with their arrangements for enabling some of the pupils of the school to learn horse-riding. Swimming is available for most of the pupils.

The following table shows an analysis of the conditions of the pupils who were in attendance during the year.

Condition	Boys	Girls
Abnormal Gait	—	1
Achondroplasia	—	1
Arthrogryposis	2	—
Asthma	13	2
Ataxia	2	—
Athetosis	1	—
Bronchiectasis	1	—
Cerebral Palsy	11	7
Cerebral Tumour	1	2
Coeliac Disease	—	1
Congenital Dislocation of Hip	—	1
Congenital Heart Disease	2	6
Cystinosis	—	1
Dermatomyositis	—	1
De Toni Franconi Syndrome	1	—
Diabetes	—	2
Eczema	3	—
Emotional Difficulties	1	2
Epilepsy	2	2
Exomphalos	—	1
Fallot's Tetralogy	1	1
Fragilitas Ossium	1	—
Fibro Cystic Disease	1	—
Galactosaemia	1	—
General Debility	1	—
Haemophilia	1	—
Hemiparesis	2	1
Hemiplegia	2	—
Hydrocephalus	—	1
Hypospadias	1	—
Hypotonia	1	—
Ichthyosis	1	—
Morquio's Disease	1	—
Muscular Dystrophy	3	—
Myelomeningocele	1	2
Myelomeningocele and Hydrocephalus	1	2
Nephrotic Syndrome	1	—
Partial Sight	—	2
Perthe's Disease	3	—
Polycystic Kidneys	—	1
Progressive Cerebellar Syndrome	1	—
Recurrent Respiratory Infections	2	3
Rheumatoid Arthritis	—	3
Sickle Cell Anaemia	1	—
Spina Bifida	1	6
Spinal Deformity	—	1
Scoliosis	—	1
	68	54

Priory School

Priory School is a day school providing special education for 50 maladjusted pupils. Admission is made on the recommendation of the Principal School Medical Officer acting upon the advice from the Consultant Psychiatrist at the Child Guidance Clinic. Most children are discharged back to ordinary schools. In a few cases transfer to residential special schools is recommended but it remains very difficult to obtain such places.

A School Medical Officer carried out special medical examination of the pupils during the Autumn term; thereafter visits were made to the school when the need arose.

Observation Unit

The Observation Unit at present sited at St. Christopher School continues to provide for a small group of children of nursery and infant school age whose handicap prevents them from attending normal school. The complicated task of identifying the various learning problems of the children, then trying to find a method of dealing with them is only one of many that present themselves to the staff in this school. The experience gained while waiting for the purpose-built Unit to open, will prove invaluable, not only to staff at the Unit, but to the visiting staff whose information, advice and therapy is essential for the total assessment of the child and his handicap.

Unfortunately the children at this Unit were also affected by the fire which destroyed St. Christopher School in November. Plans were quickly made to provide alternative accommodation.

Residential Schools

The Authority provides no residential special schools and the following table shows the number of children with varying categories of handicap, who have attended residential special schools during the year.

Blind and Partially Sighted	Boys	Girls
Blatchington Court School, Seaford	—	1
Chorleywood College, Herts	—	1
Dorton House, Seal	—	1
East Anglian School, Gorleston-on-Sea	1	—
Hethersett, Reigate	—	1
Royal Normal College, Shrewsbury	1	—
Deaf and Partially Hearing		
East Anglian School, Gorleston-on-Sea	1	—
Nutfield Priory School	—	2
Ovingdean Hall, Brighton	1	—
Tewin Water School, Welwyn	—	1
Woodford School, Woodford Green	7	2

Educationally Subnormal	Boys	Girls
Acorn Children's Centre, Newnham-on-Severn	—	1
MacIntyre Schools Ltd., Beds.	2	—
Michael House School, Ilkeston	—	1
Orchard Dene, Rainhill	—	1
Ormerod Home, St. Ann's	1	1
Ramsden Hall School, Ramsden Heath	1	—
Roffey House School, Horsham	1	—
Sheiling School, Bristol	1	—
Society School, Ealing	1	—

Physically Defective and Delicate

Black Notley Hospital, Braintree	2	—
Elmers Court School, Hants	—	1
Florence Treloar School, Alton	—	1
Ingfield Manor, Billinghamurst	1	—
Tremough Convent, Penryn	—	1

Epileptic

Lingfield Hospital School	1	3
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Maladjusted

Nazeing Park School, Nazeing	1	1
Periton Mead School, Minehead	—	1
Stokelake School, Chudleigh	1	—

Speech Defect

Moor House, Oxted	1	—
Royal School, Margate	1	—

Handicapped Pupils		(1) Blind (2) Partially Sighted		(3) Deaf (4) Partial hearing		(5) Physically handicapped (6) Delicate		(7) Maladjusted (8) Educationally subnormal		(9) Epileptic (10) Speech Defects		TOTAL (1) - (10)
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
In the year ended 31st December 1972												
Newly ascertained as	boys	-	-	-	-	1	4	5	19	-	-	29
requiring special schooling	girls	-	-	1	-	1	2	5	11	-	-	21
(i) No. of above newly	boys	-	-	-	-	-	2	5	18	-	-	25
placed in special schools	girls	-	-	-	-	1	1	3	10	1	-	16
(ii) Ascertained prior to 1.1.72	boys	-	-	-	-	-	2	4	7	-	-	13
and newly placed in special	girls	-	-	-	-	-	-	2	2	-	-	4
schools												
Requiring Places in special schools												
(a) Day	boys	-	-	-	-	-	1	2	1	-	-	4
	girls	-	-	-	-	-	1	2	2	-	-	5
(b) Boarding	boys	-	-	-	-	-	1	2	1	-	-	4
	girls	-	-	1	-	-	-	1	-	-	-	2
(i) Attending maintained												
special schools												
(a) Day	boys	1	-	-	-	16	15	35	156	-	-	223
	girls	-	2	-	-	15	9	10	113	1	-	150
(b) Boarding	boys	-	1	-	1	2	1	1	1	-	-	7
	girls	-	-	-	3	-	-	1	-	-	-	4
(ii) Attending non-maintained												
special schools												
(a) Day	boys	-	-	-	-	-	-	-	-	-	-	-
	girls	-	-	-	-	-	-	-	-	-	-	-
(b) Boarding	boys	-	-	-	-	-	-	-	1	-	2	3
	girls	2	2	-	-	-	-	-	-	2	-	6
(iii) Attending independent												
schools												
(a) Day	boys	-	-	-	-	-	-	-	-	-	-	-
	girls	-	-	-	-	-	-	-	-	-	-	-
(b) Boarding	boys	-	-	2	5	1	-	-	5	-	-	13
	girls	-	-	-	2	-	-	-	2	-	-	4
Receiving education												
otherwise than at school												
(i) in hospital	boys	-	-	-	-	-	-	-	-	-	-	-
	girls	-	-	-	-	-	-	-	-	-	-	-
(ii) in other groups	boys	-	-	-	-	3	-	-	-	-	-	3
	girls	-	-	-	-	7	-	-	-	-	-	7
(iii) at home	boys	-	-	-	-	-	-	-	-	-	-	-
	girls	-	-	-	-	-	-	-	-	-	-	-
TOTAL												
	boys	1	1	2	6	22	18	40	165	3	2	257
	girls	2	4	1	5	22	10	14	117	-	-	178

EMPLOYMENT OF SCHOOL CHILDREN

Pupils seeking employment require to be examined only when specially indicated: 7 boys and 14 girls were examined prior to temporary theatrical employment this year.

CAREERS SERVICE

Since the introduction of selective school medicals for school leavers, information has been given to officers of the Careers Department only when that information is considered likely to have a bearing on the kind of work the school leavers should or should not take up. Careers Officers, however, do request advice and information on pupils when necessary.

Once more a case conference was held during the Autumn term on handicapped school-leavers eligible to leave in the current year or in the next year. Representatives from the School Health Department, Social Services Department, Education Welfare Department, School Psychological Service and Careers Department attended, as did the headteachers of the special schools.

Each person attending was expected to have available his own up to date report on the school leavers known to him. Mr. White, Deputy Careers Officer, had already interviewed the pupils, and had assessed which ones were going to provide difficulty in placing satisfactorily. After discussion and the further management of each pupil's case agreed, the Careers Officer accepted responsibility for ensuring that progress was being made, when necessary referring back to the appropriate officer for his further action.

Although there is still room for improvement in provisions for the handicapped school leaver, the results of the recent developments are satisfying and I would hope auger well for the future.

SCHOOL HYGIENE

Water

All the learner swimming pools are provided with automatic filtration and chlorination units. Daily records are kept of the residual chlorine content and pH of the water. Public Health Inspectors take samples periodically for bacteriological examination. The water has been maintained at standards which meet the Health Department requirements. No outbreaks of infectious disease have been caused by contaminated water in these pools.

Plantar Warts

The number of children being treated at the school clinics for plantar warts had been steadily rising in 1971. It was realised that there were other children at school who either had not been detected or whose treatment had been delayed through failure to identify early. It was, therefore, considered necessary to recommend that foot inspections should be carried out in all schools, preferably by physical education staff. It was advised that any abnormality should be referred to the School Health Service or to the child's own general practitioner for adequate treatment. It was also recommended that bare-foot activities, other than that associated with the swimming baths, should be prohibited, at least until such time as the epidemic had cleared. Letters were sent to all the headteachers in the town to advise them of the situation. Short courses of instruction on verruca and its prevention, together with a demonstration of verruca and its treatment were arranged at Warrior Square for physical education instructors. The physical education organisers undertook supervision of the situation in the schools when the numbers of known cases rose to about ten. The health visitors were asked to give further advice in the schools concerning individual cases.

By the end of the year the number of known cases of verruca treated at Warrior Square had doubled. Again the figures were considered an underestimate of the problem as many pupils attended their own General Practitioner or a chiropodist for treatment. It was not possible to relax restrictions aimed at controlling the outbreak of verruca in schools and eventually eliminating the condition.

School Meals Service

Applicants for a post in the School Meals Service submit a Health questionnaire for scrutiny by medical officers and are given written instructions on personal hygiene. All staff are required to produce evidence of a satisfactory chest X-ray examination. Whenever a member of the kitchen staff or school meals assistant has suffered a gastro-intestinal upset, the opinion of the medical officer is sought and guidance is given concerning her return to work.

Once more, there were no outbreaks of food-borne infection associated with the School Meals Service.

PROPHYLACTIC MEASURES

The Local Health Authority has been providing for some time immunization against poliomyelitis, diphtheria, whooping cough, tetanus and measles. The visits to senior schools, introduced in 1970, to vaccinate girls against rubella continued.

B.C.G. Vaccination

B.C.G. vaccination against tuberculosis is the responsibility of the Chest Clinic and School Health Service. In the schools, in the age group eligible for B.C.G. vaccination (13 years) 2,087 children were tested, of whom 2,022 were negative reactors and 1,948 received B.C.G. vaccine. In addition, 3,824 children outside this age-group received skin tests. Arrangements for dealing with pupils with positive or doubtful positive reactions to the Heaf test remained the same.

INFECTIOUS DISEASES

In addition to the routine work described above to prevent the spread of tuberculosis, it was necessary in the early part of the year to conduct some intensive work in tracing contacts of a newly-diagnosed case of tuberculosis: 313 child contacts were identified in the borough and South-East Essex. Of those children tested for evidence of infection, 233 were found to give negative reactions. In the borough children, three only were found to have natural positive reactions to the tests. Treatment was offered in one case and all three cases were kept under review.

A leaflet giving the revised recommendations for action in the event of the occurrence of infectious diseases amongst children attending schools, nursery schools, nursery classes, playgroups and child-minding groups, is available from the Health Department. To assist in the control of spread of infection, intimation of the occurrence of infectious disease, particularly undue prevalence amongst school children, should be sent to the Health Department as early as possible. No one is in a better position than the headteacher to draw attention to outbreaks of unusual or multiple illnesses in schools. Information from other sources is always tardy or incomplete. Delay imposes obstacles which impede investigation and may prove insurmountable. It is essential to make a telephoned report about any illness suggestive of food poisoning immediately, because successful investigation may depend upon samples of food being available.

**PART 1 - MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY
AND SPECIAL SCHOOLS)**

TABLE A - PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	No. of pupils Inspected	Physical Condition of Pupils Inspected		No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		For defective vision (excluding squint)	For any other condition recorded at Part II	Total Individual Pupils
		No.	No.		(6)	(7)	(8)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1968 and later	46	46	-	-	-	-	-
1967	822	822	-	-	18	41	52
1966	1489	1489	-	-	24	83	98
1965	244	244	-	-	6	9	15
1964	63	63	-	-	1	4	5
1963	5	5	-	-	-	-	-
1962	3	3	-	-	-	-	-
1961	813	813	-	629	41	23	63
1960	329	329	-	335	12	8	20
1959	675	675	-	787	10	14	22
1958	328	328	-	400	6	9	14
1957	27	27	-	-	1	-	1
and earlier							
TOTAL	4844	4844	-	2151	119	191	290

PART II - DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR
TABLE A - PERIODIC INSPECTIONS

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1972

Defect Code No.	Defect or Disease	Entrants		Leavers		Others		Total	
		Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4	Skin	7	86	4	29	4	35	15	150
5	Eyes -								
	(a) Vision	49	164	17	141	53	121	119	426
	(b) Squint	10	66	-	10	1	30	11	106
	(c) Other	-	13	-	-	-	6	-	19
6	Ears -								
	(a) Hearing	67	273	11	10	13	24	91	307
	(b) Otitis Media	1	21	-	5	-	1	1	27
	(c) Other	1	13	-	5	-	3	1	21
7	Nose and Throat	10	99	1	25	3	21	14	145
8	Speech	18	95	1	2	1	5	20	102
9	Lymphatic Glands	-	20	-	-	-	-	-	20
10	Heart	1	15	-	11	-	9	1	35
11	Lungs	2	43	-	56	-	35	2	134
12	Developmental -								
	(a) Hernia	1	3	-	-	-	3	1	6
	(b) Other	5	55	-	5	-	14	5	74
13	Orthopaedic -								
	(a) Posture	2	7	-	6	1	1	3	14
	(b) Feet	2	78	2	25	1	29	5	132
	(c) Other	-	14	1	15	-	19	1	48
14	Nervous System -								
	(a) Epilepsy	-	9	-	9	-	10	-	28
	(b) Other	-	10	1	9	-	6	1	25
15	Psychological								
	(a) Development	2	27	-	5	3	10	5	42
	(b) Stability	-	25	-	6	1	11	1	42
16	Abdomen	-	8	-	11	-	11	-	30
17	Other	8	91	2	26	3	20	13	137

TABLE B – OTHER INSPECTIONS

Number of Special Inspections	26,038
Number of Re-inspections	<u>9,344</u>
	<u>35,382</u>

TABLE C – INFESTATION WITH VERMIN

(1)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	12,702
(2)	Total number of individual pupils found to be infested	44

SCREENING TESTS OF VISION AND HEARING

1(a)	Is the vision of entrants tested as a routine within their first year at school?	Yes																						
(b)	If not, at what age is the first routine test carried out?																							
2	At what age(s) is vision testing repeated during a child's school life?	<table border="1"><tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td></tr><tr><td></td><td>✓</td><td></td><td></td><td>✓</td><td></td><td>✓</td><td>✓</td><td></td><td></td><td></td></tr></table>	6	7	8	9	10	11	12	13	14	15	16		✓			✓		✓	✓			
6	7	8	9	10	11	12	13	14	15	16														
	✓			✓		✓	✓																	
3(a)	Is colour vision testing undertaken?	Yes																						
(b)	If so, at what age?	10+ and 12+																						
(c)	Are both boys and girls tested?	Yes																						
4(a)	By whom is vision testing carried out?	School nurses																						
(b)	By whom is colour vision testing carried out?	School Medical Officers and School Nurses																						
5(a)	Is routine audiometric testing of entrants carried out within their first year at school	Yes																						
(b)	If not, at what age is the first routine audiometric test carried out?	-																						
(c)	By whom is audiometric testing carried out?	School Nurses																						

TABLE B - SPECIAL INSPECTIONS

TABLE B - SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease	SPECIAL INSPECTIONS	
		Requiring Treatment (3)	Requiring Observation (4)
(1)	(2)		
4	Skin	1	1
5	Eyes - (a) Vision	308	355
	(b) Squint	1	2
	(c) Other	3	-
6	Ears - (a) Hearing	51	2376
	(b) Otitis Media	-	1
	(c) Other	-	1
7	Nose and Throat	7	5
8	Speech	4	9
9	Lymphatic Glands	-	-
10	Heart	-	2
11	Lungs	-	5
12	Developmental -		
	(a) Hernia	1	1
	(b) Other	3	6
13	Orthopaedic -		
	(a) Posture	-	-
	(b) Feet	-	1
	(c) Other	-	1
14	Nervous system -		
	(a) Epilepsy	-	1
	(b) Other	-	1
15	Psychological -		
	(a) Development	-	9
	(b) Stability	223	20
16	Abdomen	-	3
17	Other	2	10

PART III - TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A - EYE DISEASE, DEFECTIVE VISION AND SQUINT

	<u>Number of cases known to have been dealt with</u>
External and other, excluding errors of refraction and squint	3
Errors of refraction (including squint)	281
	<hr/>
Total	284
	<hr/>
Number of pupils for whom spectacles were prescribed	146

TABLE B - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	<u>Number of cases known to have been dealt with</u>
Received operative treatment	
(a) for diseases of the ear	77
(b) for adenoids and chronic tonsillitis	118
(c) for other nose and throat conditions	-
Received other forms of treatment	-
Total	<u>195</u>
Total number of pupils in school who are known to have been provided with hearing aids	
(a) in 1972 	5
(b) in previous years 	50

TABLE C - ORTHOPAEDIC AND POSTURAL DEFECTS

	<u>Number of cases known to have been treated</u>
(a) Pupils treated at clinics or outpatient departments 	126
(b) Treated at school for postural defects	-

TABLE D - DISEASES OF THE SKIN
(excluding uncleanliness for which see Table D of Part I)

	<u>Number of cases known to have been treated</u>
Ringworm:(a) Scalp 	-
(b) Body 	1
Scabies 	105
Impetigo 	-
Other skin diseases 	945
Total	<u>976</u>

TABLE E - CHILD GUIDANCE TREATMENT

	<u>Number of cases known to have been treated</u>
Pupils treated at Child Guidance Clinics	218

TABLE F - SPEECH THERAPY

	<u>Number of cases known to have been treated</u>
Pupils treated by Speech Therapists ...	257

TABLE G - OTHER TREATMENT GIVEN

	<u>Number of cases known to have been treated</u>
(a) Pupils with minor ailments ...	11
(b) Pupils who received convalescent treatment under School Health Service arrangement	-
(c) Pupils who received B.C.G. vaccination	1948
(d) Tuberculin Surveys (other than for B.C.G.)	3903
(e) Physiotherapy	80
(f) Orthoptic Clinic	968
(g) School children seen at Southend General Hospital Casualty Department (to 30.9.72 only)	1147
	<u>8057</u>

**DENTAL INSPECTION AND TREATMENT CARRIED OUT BY
THE AUTHORITY**

ATTENDANCES AND TREATMENT

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	617	606	49	1272
Subsequent visits	768	569	81	1418
Total visits	1385	1175	130	2690
Additional courses of treatment commenced	228	136	9	373
Fillings in permanent teeth ...	499	1259	201	1959
Fillings in deciduous teeth ...	1021	118		1139
Permanent teeth filled ...	412	1081	142	1635
Deciduous teeth filled ...	981	115		1096
Permanent teeth extracted ...	26	118	32	176
Deciduous teeth extracted ...	859	319		1178
General anaesthetics ...	194	75	5	274
Emergencies	143	99	18	260

Number of pupils x-rayed	109
Prophylaxis	51
Teeth otherwise conserved	8
Number of teeth root filled	5
Inlays	2
Crowns	15
Courses of treatment completed	1310

ORTHODONTICS

New cases commenced during year
Cases completed during year
Cases discontinued during year
No. of removable appliances fitted
No. of fixed appliances fitted
Pupils referred to Hospital Consultant

16
10
3
19
—
38

DENTURES

Pupils supplied with F.U. or F.L. (first time)
Pupils supplied with other dentures (first time)
Number of dentures supplied

5 to 9	10 to 14	15 and over	Total
-	-	-	-
2	3	1	6
2	3	3	8

ANAESTHETICS General Anaesthetics administered by
Medical Anaesthetists

276

INSPECTIONS

(a) First inspection at school
(b) First inspection at clinic
Number of (a) and (b) found to require treatment
Number of (a) and (b) offered treatment
(c) Pupils re-inspected at school clinic
Number of (c) found to require treatment

Number of pupils
Number of pupils
13663
903
7982
7982
1335
901

SESSIONS

Sessions devoted to treatment
Sessions devoted to inspections
Sessions devoted to Dental
Health Education

534
78
9

